DOCUMENT RESUME

ED 028 476

CG 003 739

By-Daane, Calvin; And Others

Developing Group Counseling Models for the Neighborhood Youth Corps. Final Report.

Arizona State Univ., Tempe.
Spons Agency-Office of Manpower Policy, Evaluation, and Research (DOL), Washington, D.C.
Pub Date Jan 69
Note-301p.
EDRS Price MF-$1.25 HC-$15.15
Descriptors-*Counseling Effectiveness, Counselor Characteristics, *Counselor Performance, Counselor Role, Experimental Programs, Group Behavior, *Group Counseling, *Group Dynamics, Group Experience, *Models, Rehabilitation Counseling, Research Projects

Counseling in small groups was planned for a sample of youth from the Neighborhood Youth Corps (NYC). Five models were involved: (1) Interpersonal, (2) Intropersonal, (3) Problem Identification, (4) Perceptual Modification, and (5) Relationship. Each model, designed to elicit specified behavior, utilized task prescriptions, selective responding, modeling, and "other-rapport" statements. Basic goals for the study were recommendations for NYC counseling and new variables for later research. Four areas of data were gathered: (1) pre- and post-testing, (2) comparison of enrollee behavior prior to and during counseling, (3) a comparative verbal interaction analysis between models, and (4) counselors' evaluation and self report. The counseling brought observable and positive effects. The team idea of two trained leaders conducting each model worked well, and the models appeared functional for group maintenance and balance of comfort-excitement levels. The models appear practical and functional for NYC counseling. (Author/KP)

ED028476

BY

[illegible] DAANE
ROBERT GOLD
PATRICK McGREEVY
WAYNE MAES
DONALD KE[illegible]YER

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.

ARIZONA STATE UNIVERSITY
JANUARY 1969

This report was prepared under contract No. 41-7-003-3 for the Manpower Administration, U.S. Department of Labor, under authority of the Economic Opportunity Act. Researchers undertaking such projects under government sponsorship are encouraged to express their own judgments. Viewpoints stated in this report do not necessarily represent the official position of the Department of Labor.

FINAL REPORT

on

DEVELOPING GROUP COUNSELING MODELS FOR THE NEIGHBORHOOD YOUTH CORPS

to

MANPOWER ADMINISTRATION
OFFICE OF MANPOWER RESEARCH
U.S. DEPARTMENT OF LABOR
1730 "M" Street N.W.
Washington, D.C.

by

CALVIN DAANE
ROBERT GOLD
PATRICK McGREEVY
WAYNE MAES
DONALD KENOYER

ARIZONA STATE UNIVERSITY

January 1969
Contract No. 41-7-005-3

ACKNOWLEDGEMENTS

Dr. Howard Rosen, Director, Office of Manpower Research; William Paschell, Chief and Joseph Collins, Assistant Chief of Special Manpower Problems Research; Dr. George Weber, Harry Lieberman, and Paula Kartalos of the Bureau of Work Training Programs, have professional concerns for counseling and poverty populations. They see the need for definitive research, but also the needs of the researchers. Their help was consistent and much appreciated.

Dr. C. Gilbert Wrenn, a friend and colleague, was helpful throughout. We felt his seasoned wisdom and his youthful spirit especially during some of the trying times. A project such as this would be impossible without the alert understanding of a departmental chairman. Dr. Sandford Davis understood project needs and gave us constant support.

William Mermis worked with the Phoenix sample and program visitations. Paul Carollo was senior counselor and helped with supervision. Stephen Jung achieved all of the computer printouts. They were key members of the Project team.

Various consultants gave effort and concern for the Project: Dr. Karl Pribram gave us valuable suggestions and empathic understanding, Dr. James Moore worked intensively with data interpretations, Dr. Gordon Wainwright looked at the early formulations of the research design, and Dr. Garth Blackham, Dr. William Cabianca, Dr. Robert Ripley, Dr. Lester Snyder helped to evaluate our phase I report.

Jack Kaemper, Dr. Bob Patton, and Dr. Bud Watson helped establish and coordinate the Albuquerque sample. Bruce Starke, Bob Hamilton, and James DeVoss helped obtain the Phoenix sample and surmount the problems of research control.

John Caton, Wade Estes, Ken Jamison, Jack Kaemper, Del Valdez, and Edward Verplough were counselors for the models. Tom Blain, Bill Teel, and Don Thomas monitored the Control I Groups. Joyce Boller, Vergie Behrens, Sandy Creighton, Tom Gettys, Delloyd Hammond, Dennis Pearson, Dick Rankin, and Peggy Smith scored the audio tapes. Mary Baron helped with testing, Gordon Thompson and Ken Graham did the video work, and Liz Heaphy was the project secretary throughout.

To these people and the numbers of graduate students who gave us their interest and concern, this project is much in debt.

SUMMARY

Thirty-two counseling contact hours were planned for NYC youth with twice weekly meetings over a two month period. The sample included both males and females and involved 243 enrollees from both in-school and out-of-school programs. The cities were Albuquerque, New Mexico and Phoenix, Arizona.

The counseling contact occurred in small groups of eight and involved five specified models for counseling procedure. Each model was designed to elicit specified behaviors during the group sessions. There were two control groups: one used supervised self instruction in reading and arithmetic; the second had no treatment. Each counseling group had two leaders; a masters degree counselor and a regularly employed NYC coordinator. The teams were pre-trained and attended control meetings during the treatment period. There were four teams in all, with each team conducting each model.

THE MODELS

The models were defined as: Interpersonal, the identifying problems as situations with awareness of the varying self behaviors and the projected expectations of others, I do, they expect; Intrapersonal, the self and self aspiration concept -- "me", "not me", "wanted me"; Problem Identification, the role playing and role switching in projected problem situations of "I do" and "they do" roles. The counselor managed the drama which was developed from a member's attempt to define his problem, and were the "alter egos" for the players; Perceptual Modification, the expanding perceptions of self, and authority figures to the inclusive of positive, through on-going, immediate attentions and scheduled summaries for the more positive statements; Relationship, where a communication style was defined and idealized as including increased "complete messages" a linking of perception, feeling and motive and a reduction of "double messages" often noted from cancelling words such as "but" or "however", etc. The model sought to encourage self-disclosure and feedback with a structured "feedback chair' used to elicit "top and bottom" impressions between members.

THE METHODS

Each model comprised a separate focus and desired behavior, but utilized the same unique basic counselor methods. They were described as: task prescription, selective responding, modeling and "other-rapport" statements.

Task prescriptions were explanations of expected activity. There were two levels of tasking. One was non-specific in that it asked for more information without imposed limits or direction. The purpose was to bring more interaction on a given topic and were usually given in some manner of: "tell me more about that". The second level was used for achieving more depth and usually involved a more specific request such as: "What did you think when the boss blamed you?" "What did you say at that time?"

Selective Responding consisted of verbal and non-verbal attention as reinforcement for desired behavior statements as they occurred among group members. Acknowledgement, Affirmation and Clarification were the techniques most often used. Where a member's statement contained several aspects, topics or ways to give evaluation, the counselor would select out the aspect most closely related to the specified desired behavior of the model and then responded to this aspect leaving the others unattended.

Modeling was used to initiate social imitation. To do this the counselor usually made a desired behavior statement in terms of his own personal experience. The effectiveness of his own social reward in terms of group attention was considered to be a potential motive for the member making a self-statement in that same way. The modeling was not always an explicitly defined process, however. At some times, it occurred from the general behavior of the counselor with unconsciously imitation by the member.

"Other-Rapport" Statements. The counseling session was not all "down to business" model input. As often as necessary for comfort and rapport, the counselor initiated and, contributed to "chit-chat" or "getting to know you type" conversation. These statements were used as a balance for maintaining a functional comfort-excitement ratio during the sessions. This was felt to be necessary for continuing maintenance of the group.

GOALS ANC OUTCOMES

There were two basic goals for the study: Recommendations for NYC counseling, and new variables defined for later research. Four areas of data were gathered in the expirimental study: (1) pre- and post testing for estimates of enrollee change following counseling, (2) total program enrollee behavior was compared between two months prior and two months during counseling, (3) a comparative verbal interaction analysis between models, and (4) counselors evaluation and self report of satisfaction with the various models.

The goal for the counseling was the increased use of employability behaviors. Expanded perception, communication skill, and improved feelings about self were the major criteria applied across models.

RESULTS

The self concept test noted both populations well within the normal range. Generally, the enrollees felt good about themselves but showed hostility toward their environment. Counseling developed more variability in this regard. In-school enrollees showed more gains in Expanded perception where the counseling tended to serve as enrichment for an expanded facility with "language givens". Out-of-school enrollees improved most in attitude toward the NYC program, work, and fellow workers. Both populations drew increased positive attitudes from work supervisors. The two month pre- and during observations of enrollee social behavior showed increases in job attendance and enrollment in MDTA and GED supportive programs, a reduction in number of program "run-away" terminations, and a reduced number of court referrals. During counseling, there were less court cases and less felonies.

The models were rated for effectiveness as: Problem Identification, Intrapersonal, Perceptual Modification, Interpersonal and Relationship, in that order. Problem Identification appeared to be most effective for improving Member to Member direct Responding, and also for Expanded Perception with the in-school enrollees. Both the counselor and co-counselor rated it as most satisfying. Enrollee attitudes toward the NYC program and work were improved most from Perceptual Modification and Intrapersonal. Counselors liked both models, but co-counselors gave low ratings to Perceptual Modification. Co-Counselors gave high ratings to Interpersonal, however counselors disagreed. Interpersonal was effective for Expanded Perception among in-school enrollees and for Member to Member Responding for the out-of-school population. Relationship was low to average for all criteria.

The counseling brought observable and positive effects for enrollees. The team idea worked well, and the models appeared functional for group maintenance and balance of comfort-excitement levels. The models appear practical and functional for NYC Counseling. There are predictable gains from use, however, several important variables are in need of further research.

CONTENTS

Page

INTRODUCTION 1

PART I -- BACKGROUND 5

- Enrollee Characteristics 6
- NYC Counseling 9
- Counseling as Intervention 10
- Counseling With Models 13
- Expanded Perception and Employability 16

PART II -- THE STUDY 22

- The Models 23
  - The Dimensions 23
  - Problem Identification 25
  - Intrapersonal 28
  - Interpersonal 31
  - Perceptual Modification 34
  - Relationship 37
- The Goals 42
- Research Design 43
  - The Populations 44
  - Treatment Control 45
  - Data Collection 47
  - Statistical Methodology 49
- Summary 54

PART III --RESEARCH FINDINGS 56

- Changes That Follow Counseling 57
  - IPAT Anxiety and Tennessee Self Concept 57
  - Attitudes Toward Enrollee 62
  - Enrollee Attitudes 66
  - Expanded Perception 75
  - Member-to-Member Responding 93
- Summary 95

CONTENTS, Continued Page

PART III -- RESEARCH FINDINGS Continued

Changes Associated with Counseling 102

Program Terminations 103
Job Absence 103
School Absence, Discipline, Grades 104
Juvenile Court Referrals 106

Summary 107

PART IV -- DESCRITPIONS OF THE COUNSELING PROCESS 110

Interaction Analysis 111

Within Session Time Segments 111
Between Progressive Sessions 118
Member-to-Member Responding 130
Hill Interaction Matrix 131

Counselor Evaluation of Models 133

Counselor Satisfaction 134
Co-Counselor Satisfaction 135
Counselor, Co-Counselor Compared 137

Summary 143

PART V -- IN RETROSPECT 145

If We Had It To Do Over Again 146
About the Counseling 148
About the Models 151
For Further Research 152
Recommendations for NYC Counseling 156

PART VI -- CONCEPTS IN BEHAVIORAL AND EXISTENTIAL COUNSELING 158

Counseling and Behaviorism 159

Why Groups 163
Verbal Behavior 165
Response Classes Modified 168
Generalization and Response Class 173

PART VI -- CONCEPTS IN BEHAVIORAL AND EXISTENTIAL COUNSELING Continued

Four Central Concepts 176
Awareness and the Reinforcing Event 177
Reinforcing Stimuli and the Therapist 178
Specific Reinforcing Stimuli 181
Counselor as a Generalized Reinforcer 183
Prescription and Counseling 184
Role Playing, Imitation and Modeling 187
Behavioral Deficits 191

Existential Group Counseling 193

Philosophical Origins 193
Existential Psychology 194
Anxiety 197
Anxiety of Fate and Death 198
Anxiety of Meaninglessness 198
Anxiety of Guilt and Condemnation 200
Loneliness and Alienation 201
Courage 202
Openness 204
The Open Behavioral Scientist 205
The Open Therapist 206
The Open Client 207
The Human Phenomena 208
Existential Counseling in Groups 209
Self Disclosure 212
Disclosure of Positive Thoughts and Feelings 214
Disclosure of Reactions Toward Others 215
The Existential Group Leader 217

BIBLIOGRAPHY 219

APPENDICES

1. Programmed Instruction Sequence 280
2. Expanded Perception Test 282
3. Enrollee Attitude Scale 283
4. Work Supervisor Rating Scale 284
5. Teacher Rating Scale 285
6. Scoring of Member-to-Member Responding 287
7. Counselor and Co-Counselor Evaluation Scale 288
8. The Hill Interaction Matrix 289

INTRODUCTION

What follows is a report of efforts to develop and refine group counseling procedures for the Neighborhood Youth Corps (NYC). Their effectiveness was tested with proverty youth of late adolescent age. Five procedural models were constructed from the literature and from theory and technique formulations generated during the project. Models are designated as: Interpersonal, Intrapersonal, Problem Identification, Perceptual Modification, and Relationship. Four basic counselor techniques were defined for use within each procedural model. The techniques were designated as: task prescription, modeling of desired behavior, selective responding to desired behavior, and "other" statements. The basic purpose of the project was to make recommendations regarding the use of the models and methods, and to generate hypotheses for further research. We were looking for new ways to do counseling by applying old methods in new combinations, and using new tests for effectiveness.

The project encompassed two phases. First, there was search for ideas and new data with respect to populations and potential treatments. The second phase involved experimental research with the actual counseling of youth and research observations.

In order to study the NYC programs, a sample of NYC programs was selected for observational analysis, and a staff member made site visitations. A semi-structured interview was conducted with administrators, enrollees, program counselors, and coordinators. The purpose of the interviews was to gain insight regarding on-going counseling procedures, program goals, procedures, and enrollee characteristics. Selected Youth Opportunity Centers, community service agencies which conduct counseling, and university counseling programs were also visited to collect additional information.

Data from published literature, visitations, and participation in on-going groups were used to formulate the rationale and to uncover usable techniques. The models have been viewed as prescriptions for specified behavior during counseling with the counseling behaviors seen as independent variables related to dependent variables outside of counseling and as a result of the on-going counseling process. The less clearly defined, more intuitive data were also collected however, in order to provide sources for new hypotheses which could be tested in future studies.

The populations from which the samples were drawn were the Neighborhood Youth Corps NYC programs in Phoenix, Arizona and Albuquerque, New Mexico. The selection was based on availability, proximity, and the feasibility for controlled research. A period of eight weeks was established as the treatment period, with two meetings per week, and two hours per meeting.

Most of the counseling studies in conditioning have, thus far, utilized relatively short periods for treatment, but the positive gains from process or interaction counseling have more often been associated with longer treatment periods. Since the treatment models in this study involved both conditioning and process counseling, the length and number of overall sessions were extended in order to include the potential gains from both aspects. The two month period also allowed for some empirical observations of enrollees while counseling was taking place. Counseling is often considered helpful in reducing "drop-out" and program control problems. The study also looked for change in these areas.

Very early in the life of the project we realized that we were, in fact, much concerned with both humanistic, philosophic issues and with the efficiency for bringing about specified behavior change. Concepts from both humanistic and behavioral theory were thus much involved in our thinking. We found ourselves in the position of either keeping the two approaches intact and utilizing them separately, or attempting a conceptual marriage of the two basic positions. The intellectual and emotional commitments of project members were sometimes at variance with each other with respect to these. opposing conceptual frameworks. We combed the literature and held extensive discussions in our own group settings in order to find agreeable key concepts and we struggled to define issues and identify variables which could be relevant for our work. Results of these efforts are included in this report.

During the planning stages the dialogue between project members was often intense because of the individual commitments and we lived with the inevitable anxiety associated with synthesis and change. While consensus was never reached on some aspects of underlying philosophical and psychological theory, we did achieve consensus concerning the structure of the models and leader techniques. We agreed to define, identify and reinforce desired behavior but to do so within a somewhat "free wheeling" open discussion framework. Leader input was thus identified, but the input was never to impede rapport.

In the early planning stages we grappled with the difficult task of formulating a theoretical base for the models. However, the realities of the youth to be worked with and time limits set for planning prevented the safe retreat into everlasting theory building. Each project member took his turn for his own theoretical and practical persuasion. Thus, we had the benefits of the cross fertilization of ideas and the more rigorous look at theory.

Increasingly, concepts in perception and communication seemed to dominate our discussions. The nature of projection and "narrowed" perception were challenged and related to a concept of communication. The "hard looks" at these issues brought into clearer focus new notions about reality testing and the communication process. We found ourselves repeatedly discussing perception in terms of expansion and restriction, and the relevance of this to communication. We worked with the possibilities of a relationship between perceptual restriction and the use of language as a cultural inheritance and social milieu. We considered the nature of middle-class perceptions and attitude behavior (including language) and asked whether we really wanted to develop more similarities between poverty and middle-class traits. It seemed clear that the poverty groups' acquisition of certain middle-class traits would make it easier for people to work together. Yet, it seemed equally clear that some diversity was important for reciprocal change. For poverty to simply mimic middle class traits indiscriminately would be adding to the perceptual restriction problem and in the long range, communication difficulties.

We argued over definitions for creative socialization and tried to establish some criteria in this regard. We arrived at the "notion" that perceptual expansion may be the best means to creative socialization skills. It seemed clear that individuals join with others who have clusters of similar thought in order to gain security, but equally apparent that individuals can also gain security from a wider examination and increased awareness of their own individuality. We proceeded to build our models for these two aspects. Our notion was that expanded perception and creative socialization would lead to improved communication and improved behavior regarding some of the social deficiencies which predisposed them to failure in middle class contacts. The counseling models which we developed were different approaches designed to arrive at these goals.

Early in our discussions we decided upon using two counselors in the group. It seemed like a good way to train new counselors for leadership and also utilize the vast but varying skills of NYC advisors who had first hand knowledge of the members' existing social behavior. Thus, the co-counselors were trained in verbal responding efficiency, but we carefully avoided shaping-out his unique behaviors which enabled him to relate to group members as a "personal parent." He was assigned to the marginal interviewing function which allowed him to meet with a member on an individual basis at his request. During this interview he was encouraged to respond in terms of encouragement and advice as to how the member might call upon the group skills for help.

A by-product of the co-counselor arrangement was the career exploration opportunity for the para-professional. For the most part para-professionals seek the status of professionals and often continue into professional training. This matching process thus provided a kind of internship which helped him decide whether he wished to proceed into professional training.

Several important questions were answered in the early stages of this project. How many hours can proverty youth be expected to maintain themselves as a group? How long should the sessions be? How much time is needed for each session in order to develop some intensity, and yet not produce over-riding anxiety or defensive boredom? The issues were resolved out of the past counseling experience of the project members. We established a period of two months for the duration of the counseling sessions with two hours per session, twice weekly.

For the most part, the project staff shared equal responsibility for each practical and theoretical aspect. Ideas were developed from "blackboard scratchings" and written papers. They were often critically reviewed in group meetings which frequently took the form of group process periods. In early September project members formed an all-night marathon-discussion period. This seemed to open up "straight-talk" between us, and the defensive part of formalities and couched statements were, for the most part, eliminated. From time to time we called in consultants to review materials and criticize ideas and stimulate us with new comments. This procedure was extremely helpful. It not only helped us to achieve a "break through" on confusing ideas, but seemed to have a much more important coalescing and unifying effect upon the total project as we felt closer and more in need of helping each other answer questions that we posed.

The conceptualization period was at once hectic and anxiety-provoking, yet extremely exciting professionally. Ideas often seemed to expand beyond reach and the practical limitations of time seemed an imposition. It was with considerable reluctance, yet anticipation, that we pressed for a halt to conceptualization and moved to the start of the experimental research and counseling treatment.

This is a report of the activity of both the conceptualization and treatment phases. Notions, speculations, and results of our literature search are in Parts I and VI. The research design is reported in Part II. The findings from the research are in Parts III and IV. The inference concerning recommendations for NYC Counseling and new variables to research are in Part V.

PART I

BACKGROUND

Prior to undertaking the experimental research, we studied the NYC as a population, searched the literature and observed current group work for potential procedures we could use. We were looking for practical applications which would yield some recommendations for NYC Counseling, and new hypothesis. Thus, we needed definitive procedures, and a way to clearly describe the process and evaluate the outcome.

We developed four objectives: 1) to study enrollee characteristics, 2) to study NYC Counseling, 3) to study current counseling procedures, and 4) to define counseling goals. The results of these efforts are presented as background for the study.

ENROLLEE CHARACTERISTICS

The literature was reviewed and visits were made with enrollees in selected programs. There were difficulties encountered with the literature analysis. The NYC program is relatively new and little has been published to date which addresses itself to this specific population. Also, the NYC population itself is composed of a number of ethnic and geographic subgoups, and each of these subgroups have characteristics which are to some degree specific to that subgroup. We found a number of overlapping labels referring to various disadvantaged groups from varying points of view which made the clear delineation of the group difficult. Thus, visits were also made to programs and discussion groups were conducted with enrollees. During the meetings, the staff member observed and analyzed comments. His impressions from the meeting were then added to the various data reports and authoritative impressions contained in the literature.

Specific characteristics were identified. In its broadest sense, however, the characteristics of the NYC populations seemed to greatly overlap the characteristics found in the general youth population. The only major characteristic is the lack of economic resources. Less formal education, inadequate medical care, unemployment, under employment, improper diet, submarginal housing and cultural isolation or deprivation are aspects which co-exist with the inadequate economic resource. Several of these co-exist with "middle class economy" as well, but all seem to be present in extensive degrees for the NYC youth.

Gavales (1966) identified clusters of attributes such as low motivation, apathy, rebellion against authority, bitterness, low self-confidence, personal "chip on the shoulder" syndromes, sociopathic tendencies, and neurotic traits. These do seem to be more common. Hyram (1967) points to the deficiency in problem solving skills and under-developed listening skills. These were noted as more common than usual. Many of Gordon's (1964-65) list of intellectual, language, and psychomotor deficits were also observed as were Bloom, Davis and Hess's (1965) notation of school subordinate feelings. Much of the NYC enrollees' attention and energy seemed to be directed toward immediate needs. They were less able to plan and give attention to longer range goals.

But, all of these can be easily noted in youth of adequate economic resources as well. For NYC youth there is no one characteristic at fault. Rather, it's the quantity of characteristics present and the persistence. They seem to have all of the troubles, whereas the more "middle class" youth finds only one or but a few and is not overwhelmed. Four aspects are important in this regard: Coping with Authority, Communication Skills, Vascillation between Pessimism and Optimism, and Environmental Independence Vs Psychological Dependence.

COPING WITH AUTHORITY

Most NYC youth appear to experience difficulty in their attempts to cope with authority. These dislikes for authority figures have likely developed as a result of earlier unpleasant experiences with authorities who were, by and large, agents of social control. While the youth have a desire to obtain the skills necessary for upward social mobility, they are frustrated in their attempts to realize this desire because they lack effective skills for relating to authority figures. Their difficulty with a subordinate role is further complicated by their failure to make necessary discriminations between "authority figures." Parents, teachers, policemen, counselors, social workers, and employers may all be lumped together and consequently the young people lack the flexibility of response essential to effective behavior. Even as a participant in the NYC Program where he has an opportunity to work with authorities who tend to be understanding, sensitive, and democratic he is prone to respond in his old stereotyped and undifferentiated ways. This limited repertoire of behavior related to authority is in many ways "undesirable" for employability. The NYC youth tends to develop ways of coping with authority on a trial and error basis and by testing the limits of the new situation. It is in the process of the youth's attempts to work out this new relationship that the sensitivity of the immediate work supervisor and the availability of group counseling seem to be crucial.

COMMUNICATION SKILLS

A second characteristic of the youth comprising the NYC population is that of ineffective communication skills. The lack of this skill makes it difficult to function in wider, more diverse social situations. The nature of the communication deficiency varies from one subgroup to another, but, regardless of the subgroup affiliation, a common phenomenon is the tendency to develop stereotyped meanings which are unique, specific, and "locked in" to the subgroup. This has certain survival benefits within the boundaries of the minority population, however, when a member of a minority group attempts to "infiltrate" the ranks of the middle class, these stereotyped meanings and communication skills are often self-defeating.

VASCILLATION BETWEEN PESSISM AND OPTIMISM

Members of the NYC population appear to fluctuate between a pessimistic and an optimistic outlook. On the one hand, they have developed, in part through the media of mass advertising, perceptions of the middle class economic independence of which they have never really been a part. The NYC program, with its emphasis on employment, offers a ray of hope for achieving economic independence. At the same time, however, there is an underlying pessimism related to previous frustrations, and an inherent skepticism of "programs" which are designed to change and improve their lives.

At least in part, this frustration appears to be the result of a failure to be able to generate and conceptualize viable alternatives to their present situation. They lack specific plans for accomplishing movement from their present situation to another, more favorable one. The NYC youth perceives the potential benefits of economic independence through employability, but he has little in the way of operational plans for achieving these benefits. Often the plans which he holds are quite unrealistic, i. e., to be a professional athletic, movie star, or celebrity of one sort or another. Thus, there appear to be two components to this pessimistic-optimistic continuum and its resultant underlying frustration. First, the NYC youth tends not to see alternatives to the situation in which he finds himself, and second, if he does view alternatives, they are often unrealistic.

ENVIRONMENTAL INDEPENDENCE VS. PSYCHOLOGICAL DEPENDENCE

One readily notes both dependent and independent characteristics in the NYC youth. The characteristics which appear salient are influenced by the observer's point of view. If one views the NYC youth from a middle class perspective, they often appear strikingly independent in their reaction to school performance, traffic rules, etc., and in their ability to survive within the depressed area. In many ways he appears to live by his wit, and is active and impulsive in meeting his needs. He seems to act with what occasionally is described as a "scornful independence", not recognizing the traditional interdependent standards of behavior which have been evolved by the middle class.

However, there is another way of viewing this "independence." In a sense, the NYC youth must subscribe to two sets of rules. The one set of rules which are held by him and the subgroup from which he comes have evolved as a result of survival in the depressed area. The other set of rules relates to middle class employability and the participation in the benefits of a greater society. For one set of rules he has intensely personal referents; for the other he has few, if any, meaningful referents. It is perhaps the difference between a "truth" which is read about, and a "truth" which is experienced. It is easy to see that his experienced "truths" are those he employs in day-to-day situations.

Thus in a sense, the NYC youth is very dependent. He is dependent on those behaviors which have been functional in his survival on a day-to-day basis. Further, he is deficient in behaviors which will allow him to cope with a more or less middle class employment situation. He has had little opportunity to develop such behaviors due to the peculiarities of the environmental complex within which he has developed. He has had little support in problem solving or the handling of crises and has had little experience in dealing with the "establishment." He often acquires his coping behaviors through the process of trial and error, and they prove ineffective outside the situational context within which they were acquired. To the naive observer, he appears to be much like an independent adult: "He is on his own." But he tends to be emotionally immature with a limited emotional response repertoire. When he becomes "emotional," the effect tends to be polarized in frustration and impulsive action, thus shrinking the range of behavioral alternatives in the situation.

His psychological dependency is further manifested in his intense peer group relationships where stereotyped sets of appropriate behaviors have evolved, allowing a state of relative, dependent comfort or belonging. Much like the various minority groups themselves, the peer groups within minority groups tend to work out meanings and communication skills specific to the group. These provide a sense of belonging in a very narrow social sphere for those who do not otherwise belong.

NYC COUNSELING

Fourteen programs were visited in order to gain information and understanding with regard to current counseling procedures and practice. There were interviews with administrators, counselors, field coordinators, work supervisors and enrollees. The following are some observations.

The training of counselors working within the NYC setting is quite varied. The majority have at least some training in the areas of sociology and psychology, history and political science. Some have training in counseling, but only a small number hold a Master's Degree. Those that are professionally-trained often serve in administrative positions, rather than client counseling. Some of the counselors have no formal training at all, but are from minority groups and are considered "therapeutic" personalities" for the program youth.

By and large, there is minimum professional supervision within the programs and the counselors often appear to be isolated professionally, having limited relationship with community colleges, mental health clincs, universities, and professional organizations. Perhaps, as a result, there is some naivete and lack of direction with respect to "possibilities" for counseling programs. The counselor often appears to be in a situation laden with ambiguity concerning the goals he might attempt to accomplish, and the techniques he might employ. There appears to be little professional consultation available or utilized.

There is a great deal of variety in the kind of counseling procedure between programs. Almost all types of individual or group contacts are classified as counseling including the various types of social work contacts, straight information dispersal and various group orientation lectures. When professional counseling does occur it usually appears as crisis intervention and aimed at changing some specific misbehavior. The focus is usually upon work, employers, and attitudes toward authority employing those procedures identified with "traditional counseling."

There seems to be conflict between goals and procedures in the program. The counseling seeks to develop increased employability and independence. The procedures, however, seem more oriented to facilitating the administrator of an employment program and the use of devices for insuring compliance with various directives regarding employer requirements and demands.

There is uncertainty, but strong interest in group counseling among most programs visited, however, there was the clear tendency to equate group procedures with sensitivity training. There were two differing kinds of reactions: (1) favorable to group counseling and in favor of sensitivity training, and (2) favorable to group counseling but strongly against sensitivity training. The idea of selecting a model for procedure from various alternatives found much acceptance. Incorporating group counseling models was seen as holding the potential for helping counselors define their role as well as providing for more professional training and practice.

COUNSELING AS INTERVENTION

The professional literature was searched for definitive statements describing counseling procedures with particular note for procedures which could be linked to specified or at least descriptive outcomes. In addition, and because of the time lag between a group leaders current practice and publication, a variety of on-going institutional and community counseling and therapy groups were also visited for observational participation. A general impression prevailed throughout our search.

There are a variety of techniques and structures in current use which are often definitive and clearly operational. Goals or expected outcomes, however, are less clear with spare attempts to link procedure to outcome as cause and effect. Counseling outcomes expected are of two categories: (1) molar or synthesized growth outcomes which are generally capsuled or described in terms of self concept or attitude, and (2) molecular changes in behavior which can be observed as units but not necessarily linked to total growth views or developmental growth change. The two aspects might be described as "feeling better about self", and "acquiring new or modified skills."

The skills take the form of school grades, various kinds of specified applicable information, communication or interactive behavior, and adherence to various aspects of adjustment to specified situations. The "feeling better about self" takes the forms of various standardized, non-standardized and projective-type self appraisals for positive vs. negative attitudes.

THE INTERVENTION CONCEPT

Intervention in the life of an individual to effect change may focus primarily upon meaning, perceptions or behaviors. The existential counselor tends to focus upon meanings and perceptions. Consequently, the existential counselor encourages talk about perceptions of reality, perceptions of self and the meaning attached to these perceptions. The behaviorist tries to influence behavior and disregards perception and meaning. For example, the behavioral counselor might reward a withdrawn individual for any verbal or motor behavior which was evidence of movement toward people.

The two views of behavior say that expanding and correcting perceptions of self and others expands the behavioral repertoire, and that increasing or changing the behavioral repertoire has, as its counterpart, expanded and corrected perceptions and meanings. Teaching a minority youth more effective social skills in coping with the larger society expands his perceived reality of options which he can exercise and adds to the positive perceptions of himself. On the other hand, helping a proverty youth gain more positive self-perceptions through an accepting relationship with others, changes the meaning of his encountering an employer for he feels more adequate, has less fear of a "put down" and consequently behaves in more confident forthright ways. The interventions in this study were designed to focus upon various aspects of perception, meaning and behavior. They were aimed at facilitating more effective living, through perceptual and behavior change of interpersonal relations. The interventions were designed to remediate the causes of ineffective communication viz., 1) narrowed perceptions, 2) erroneous perceptions and 3) irrationally perceived fears. The prescriptions for intervention were focused upon: 1) expanding perception and increasing the behavior repertoire, 2) reality testing to correct erroneous perceptions, and 3) the reduction of irrational fear relative to perceptions of external events.

The counseling was a carefully planned sequencing of events which could encourage clients through successive steps, from a given set of perceptions, meanings and behaviors to a new and more effective set of perceptions, meanings and behavior. The following is an analogy which may demonstrate the way in which the counselors in the present study assisted clients in arriving at desired outcome behaviors. Like most analogies, if carried to its extreme, it misrepresents the process. For example, the counseling was not nearly as "lock step," nor the counselor nearly as cognitively "in charge" at each juncture as the following card analogy would imply. However, the counselors did have clearly in mind the desired behavioral outcomes and the procedures which they were to follow in facilitating client change. With these qualifications in mind, the card analogy may serve as an illustration.

The wielder of the card trick asks a person to name two of the four suits of cards. His purpose is to develop the situation where the person will finally name the desired specific card. The demonstrator's statement is: "There are four suits of cards: hearts, diamonds, clubs, and spades. Please pick any two of these four suits by naming them to me." In response to the demonstrator's task statement, let's say the subject names diamonds and hearts. The demonstrator's next task prescription is: "Okay, out of the two suits, diamonds and hearts, pick one." If the subject says diamonds, then the demonstrator says: "Okay, out of the suit of diamonds, name any five consecutive cards." Had the subject said "Hearts" instead of "Diamonds", the demonstrator would have said, "Okay, that leaves diamonds. Out of the suit of diamonds, name five consecutive cards." Similarly, when the demonstrator made his initial statement, had the subjuct responded by naming spades and clubs, the demonstrator would have replied, "Okay, that leaves hearts and diamonds. Out of these two, name one of the suits," and so on down the line, until the subject arrives unwittingly at the three of diamonds. The demonstrator guides the subject by skillful use of two types of response. He either says, "Okay, out of these pick...," or "Okay, that leaves...and out of these pick..." It is through such a sequenced set of intuitive or deliberately planned response behaviors that the person arrives at the specified card name.

When the sequence is applied to counseling settings and particularly for group counseling settings, there must be continued concern for an appropriate balance of comfort and excitement levels. As topics become more personal, more anxiousness and excitement is developed. This tends to bring interest, intrigue and involvement for group members, but is usually accompanied by a decrease in comfort. "Other-Rapport" statements were used to initiate or facilitate comfort feelings. These statements can be "chit-chat" or any content area appearing as appropriate and can be interspersed in any combination. In this study "Target responses" (tasking, selective responding, and modeling) were used to bring about the desired behavior member response. "Other-rapport" statements we used to regulate the comfort-excitement levels of the group.

COUNSELING WITH MODELS

Definitions for counseling have changed focus since counseling was first viewed as discrete vocational, educational, personal and social functions. Opinions from outside of the counseling profession were previously the sole source for establishing definitions of role and function. In its earlier days, the profession, "busied" itself with the more mundane status questions of whether its clients should be advised or counseled. The terms themselves connoted the prestige concerns of the counselor, and the "straw man" type questions of directive versus non-directive or teacher versus therapist.

The more recent writing and research reflects the increased emphasis on the counselor himself, i. e. his personal characteristics, his goals, and his procedural facilities in various settings. The "real" issues today, however illusive, are those which have to do with the counselor's function and his process or procedure. The new questions are tied to broader social issues such as preventative versus remedial counseling and counseling which frees versus that which controls.

The basic issue, however, is still one of criteria. Just as counseling has in the past relied upon "public" definitions for its role function, it has also utilized "public" criteria for the evaluation of effectiveness. Examples of such criteria are lower drop-out rate, higher grade point average, appropriateness of vocational and educational choice, delinquency control, etc. In a society which is science and goal oriented, practices which can be measured and publicly affirmed also tend to be those automatically valued and accepted. A threat to society could emerge from such indiscriminate responses. That which is measurable and publicly popular could dictate counseling criteria and subvert the effort to focus upon the development of individual potential. A trend such as this can lead to a paucity of searching questions about what objectives should be and a tendency to be content with end product evaluation.

The broad aims for society are and have been, to develop appropriate and effective behavior. The emphasis for counseling is upon individuals and their potential for growth whether it be for molar or molecular growth-change. Such an emphasis directs attention to concern for self-understanding, aspirations, and environmental awareness in terms of "Who am I?", and "What can I and what do I want to do?" For this regard, the counseling focus is upon support for an individual's exploration of reality and for communication with those who are significant to his world. The selection of appropriate behavior is then left to the client who uses counseling to help him arrive at a decision. There is considerable evidence to suggest that a supportive personal relationship during counseling does contribute to personal responsibility for decision-making. When the relationship is empathic rather than either authoritative or merely friendly and sympathetic, clients begin to know themselves and handle themselves better. This relationship doesn't just happen -- it must be created through skill and effort. Counselors today strive to be flexible, adapting their technique, and making running judgments as to how to maintain and enhance the empathic helping relationship. The new counselor is intuitive and artistic as well as diagnostic or merely a sympathetic listener.

Counselors themselves are often identified by association and sub-membership in another broad profession such as education, psychology, medicine, or employment work. However, they are also identified by their work setting such as public school, counseling office, hospital, military, or industrial establishment in private or public service. The counselor's title is his status which identifies his responsibility, his level of training,and his additional social obligations such as privilege communication. Counselor titles are often, in a very real sense, models for counseling in themselves because the title often denotes the way in which the counselor will handle his procedures. New issues have emerged regarding standards for the levels of counselor preparation and the levels also have implications for title. Increased federal legislation has created huge demand for counselors to engage in various attempts to break the social chains of poverty. Gordon (1965) has viewed optimistically the sub-professional positions such as counselor-aids, youth advisors, and street workers. He argued that the development of sub-professional counseling should involve a raising of standards among professionals who will need to develop additional supervisory skills. In any case, the new titles must yield new definitions and either the equating of procedures or the definitions of new models.

Models which identify current counseling procedures seem to form three definable groups. These have been referred to as dynamic, behavioral, and milieu.

The dynamic counselor usually works in a counseling office using verbal communication techniques to develop a personal-working relationship and atmosphere for client exploration. There are two types of dynamic model; one characterized by an interpersonal focus, and the other by an intrapersonal focus. The interpersonal compares the client's self-assessments (attitudes and skills) with environmental or normative assessments. The norm assessments may be either those generally understood as value assessments or they may be the more specific assessments from tests, surveys, or other judgments. The intrapersonal focus gives emphasis to a comparison of self-assessments with aspiration. The interpersonal process is seen as the effort to develop increased and appropriate recognition of environmental reality, and the intrapersonal as a freeing of individual spontaneity as an antidote to over conformity. A more recent focus uses a group setting. Through a leader's encouragement for free "honest" expression and feedback, members experience increased self awareness and sensitivity to others. Often there are interaction games, self-body awareness excercises or meditational sets which set the focus for subsequent verbal interaction.

The behavioral counselor is concerned with a specified behavior as the end-product of counseling. The counselor first makes a judgment about what behavior change is desired. He then employs advice, encouragement, positive affirmation, and other influence techniques to effect changes in the client's behavior in the desired directions. Behavioral counseling has also been identified with the application of planned reinforcement to operant client behaviors. The reinforcement is usually verbally administered by someone regarded by the client as significant. Reinforcements are supplied for behaviors which successively approximate those desired until the appropriate behavior is produced.

The milieu counselor gives emphasis to the client's immediate environment. He may suggest and encourage behavior change to the counselee directly, or concentrate upon providing a helping relationship but the primary focus is on parents, teachers, and others meaningful to the client. He usually consults with these others, who are the focus of counseling, as co-workers, seeking to help them better understand the client and suggesting ways of helping to shape new behavior in the student. Much of his effort is therefore, in observation and evaluation in order to design strategies for change.

The three approaches all seek to bring behavior change. The dynamic counselor wants self understanding and change in the more molar aspects of attitude and self concept. The Behavioral Counselor wants growth in a specified characteristic. The milieu counselor seeks either or both through an added focus upon environment. The various counselors use many techniques in common, but the tendency is clear. The behaviorist relies more upon conditioning; the dynamic more upon "free wheeling expression," and the milieu counselor may prefer one or both but works with both client and environment.

The approaches used in this research focused upon the client. The methods were developed from dynamic and behavioral learning concepts: Instruction, operant conditioning, social imitation and free insight. The methods were termed: task prescription, selective responding, modeling, and "other-rapport" statements. Methods were constant across models. The models were designated by a defined, specified, desired behavior. Inter-personal for example desired verbal expression about self behaviors versus behavior expectation from others. Intrapersonal was self versus self aspiration. The models were thus descriptive of the behavior desired during counseling. Just as counseling in the past has used descriptive terms to tell either what it intends to do (advising, vocational, educational, etc.), or what it intends to accomplish (sensitivity, body awareness, problem solving, psychosynthesis, etc.). The models used in the research were named for the behavior desired during counseling sessions.

EXPANDED PERCEPTION AND EMPLOYABILITY

It is generally agreed that the major goal of counseling is to assist individuals to reach their fullest potential. Defining the set of events which will lead to this accomplishment is an extremely demanding task. Counselors have been only partially successful in their attempts to clarify the nature of the counseling process. There is no dearth of theory, but the substantive facts upon which to base counseling theory have been relatively meagre. Personality theories and their counterpart counseling theories are usually based upon the distillation of the experience of those working face to face with clients rather than upon the kind of consensually agreed upon evidence that meets rigorous tests of scientific credibility. The situation becomes increasingly complex as new, and sometimes contradictory theories develop, making consensus on the characteristics of the counseling process increasingly difficult to achieve.

In a more exact science the number of theories would be reduced through experimentation, poor theories would be discarded and a central intervention theory would emerge. In counseling each theory tends to reflect the reasoned but idiosyncratic view of the author. In their uniqueness and inventiveness, the different theories often prescribe different, and sometimes conflicting, intervention styles and techniques. Such techniques tend to collect their adherents, people for whom they seem to work. These are the earmarks of a relatively new professional practice. The danger, however, is when the inductive beginnings, with the live client, lead to intricate deductive extrapolations with logical but empirically untested postulates. Such postulates concerning how the counselor should behave to achieve specific client outcomes may be intriguing and artistic, but to be professionally acceptable they must also be scientific. The specified techniques must be tried out and their pragmatic value demonstrated. What we lack today in counseling is a comprehensive theory and practice of counseling built upon research evidence, demonstrating which techniques work for which people in achieving which outcomes.

Within the past fifteen years formulations have begun to emerge which identify the client problem, the behaviors desired as the outcome of counseling and the specific counselor behaviors which are necessary during the process. Interestingly, these formulations have derived from rather different approaches to the nature of man, and from attending to different aspects of the human phenomena. These two approaches are behaviorism and existentialism. Behaviorism sees man's nature as neutral and his complicated behavior repertoire as a product of environmental influences. The existential approach, sees man as self-motivated to enhance full development and full potential. Behaviorism stresses the environmental determinants of behavior while existential psychology stresses the ontogenetic and psychological aspects of the individual as the major determinants of behavior. The human phenomena upon which the behaviorists have focused is observable behavior and its functional relationship to environmental stimuli while the existential approach has emphasized aspects which are not directly observable such as the organization of an individual's perception of the world and, in particular, the perceptions which he has of himself.

However, it is within these approaches with their obvious differences that the most definitive research has taken place. Existentialism (client centered therapy) has been able to demonstrate that for certain clients, if the counselor is genuine, empathic, open, congruent, etc., certain describable changes occur in the client's perception, e. g., he becomes more open to considering a multitude of aspects of his environment and his inner awarenesses. Behaviorism, on the other hand, has been able, through the management of reinforcements, to bring about changes in a variety of specific behaviors in clients.

The theory and methodology for change in the present research are based upon synthesis of existential and behavioral postulates. While there are differences between the two approaches, many of the ostensible differences are more apparent than actual. For example, the apparent divisiveness in behaviorism's focus upon external, observable behavior and existentialism's empahsis upon the perception of the organism might lead one to believe that he must choose to consider man as either a perceiver or a behaver while man is obviously both.

From the earliest stages of the development of the infant, behaving and perceiving are always occurring concurrently. The infant reaches out and touches a hot stove, withdraws his hand and doesn't touch the hot stove again. We can say that the stove is an aversive stimulus and the withdrawal of the hand from this stove and from stoves in the future was learned because that behavior terminates or avoids the aversive stimulus. While the infant was moving through this behavioral sequence he was aware of many of the internal and external events which were transpiring. He perceived the stove, saw and felt his hand reaching out, felt the searing pain, automatically withdrew his hand and was aware of the cessation of pain. We can say that such an event resulted in a learned behavior and a learned differentiation of perception, which is a learned meaning. In the future the hot stove will mean hurt and will be avoided. In the same way, behaviors with pleasurable consequences are learned and repeated and we develop perceptions and meanings related to those sequences that are experienced as pleasurable. Food, affection, play, etc., are perceived as pleasurable as are the behaviors which are instrumental in their acquisition. The infant gradually learns positive value for those objects which bring pleasure and negative values for those objects which bring pain.

As the human individual develops, he differentiates himself as an object in space and thus has a variety of meanings related to his perception of himself. Not only does he have meanings related to the way he looks, behaves, feels, etc., but he attaches positive values to those aspects of himself which result in pleasure and negative values to those aspects of himself which bring pain. We say he develops positive and negative perceptions of self which comprise the self concept. In the same way that the individual avoids painful and approaches pleasurable objects in his world, he tends to avoid negative thoughts about himself and "approach" positive self thoughts.

As the individual behaves and develops meanings related to his world and himself, these meanings are ever present and are important determinants of behavior. They are essential to survival for they eliminate the necessity for a continual process of trial and error. At the complex adult level restaurants mean food, traffic means danger and these meanings result in behaviors which are instrumental to surviving and developing as a person as well as to avoiding danger.

If meanings are sufficiently broad and flexible and continue to expand, we can lead an effective life, a major component of which is our interactions with others. However, difficulty in effective living can arise in a number of ways.

NARROWED PERCEPTION

A narrowed perceptual and behavioral repertoire can result from insufficient experience. The individual raised in a large city where autos were impractical might find, upon moving to the Western United States, that he lacks understandings (meanings) related to autos and skills having to do with driving. We can say that his meaning and behavior are too narrow to meet the requisites for effective living and need to be expanded.

This is virtually always true when an individual finds himself in a strange setting and certainly characterizes the movement of a poverty youth from his familiar subculture into the larger culture. The task when this eventually occurs is to teach new behaviors.

However, this becomes more complicated in social situations by the fact that the individual may not be aware of his lack of meanings and requisite behaviors. In this case he needs to test his own perception of the reality demands and receive some feedback concerning the accuracy of his projected meaning. As he becomes aware of his deficiency he can learn the requisite behaviors and expand his meanings. Other individuals and groups can be extremely helpful in assisting him to test his reality and discover those aspects for which his meanings and behaviors are insufficient.

ERRONEOUS PERCEPTIONS

A second detriment to effective living is also a problem having to do with perception and subsequent behavior. However, in this case it has to do with erroneous perceptions rather than those which are incomplete. The human being has a tendency to associate elements which occur in proximity in time and space as belonging together and then generalize this association to other similar events. For example, the poverty youth may have had some contacts with middle class whites, or at least via mass media, and associates them with a "put down" toward minority groups. This association of "White" and "put down" is often true, but of course not always true. Sometimes, and perhaps often, a middle class white seeks interaction as a fellow human being. When this does occur the poverty youth is unable to respond to the new reality because he projects the former meanings. The consequences are negative for both parties. Although the perception is erroneous, the middle class white feels misunderstood and the poverty youth feels another "put down". The perception seems true because of past associations. Understanding of this process is necessary for the exploration of fears of rejection and for the beginning of reality testing in middle class and poverty youth interaction.

IRRATIONALLY PERCEIVED FEARS

A third major cause of ineffective behavior is the erroneous perception of ideas and feelings which arouse anxiety. Through associative linkage and generalization harmful properties are attributed to objects, ideas and feelings when the harmful properties do not, in fact, exist. This might be described as projecting danger irrationally. Examples of this are the common tendency of children and adults to be fearful of harmless snakes and dogs. However, most of our anxieties are associated with interactions with people. Consequently, we may be fearful of adults because of unhappy experiences with parents, or we may we fearful of minority groups because of associations built up through the mass media or direct contact. When such fears are generalized to all members of a class, whether it be dogs, Caucasians, Negroes or employers, our behavior tends to be ineffective because natural responses to anxiety are withdrawal, aggression or psychological defensive maneuvering.

Not only do we develop irrational fears of objects in our world, but also to perceptions in ourselves. Those perceptions of ourselves which we see as bad are avoided because they make us anxious. "Weak me," "imperfect me," or "unloved me" are unacceptable so the individual avoids thinking thoughts, feeling emotions or engaging in behaviors which result in these negative self-evaluations. Many of these negative self thoughts are unrealistic.

The poverty youth may avoid going to interview for a job because he feels inferior, unacceptable, and bad in the eyes of the middle or upper-class employer. He projects upon the employer his meaning that the employer looks down upon him and behaves accordingly be being insolent, obsequious or just plain staying away because the situation triggers anxious thoughts of "inferior me".

The increase in effective behavior is through learning to discriminate between those events in the world which do and don't bode harm and through being accepted and supported by others, thus altering the ineffective behavior resulting from unrealistic self-concepts. Meaning and behavior are concurrent and interrelated. Meanings are built up or learned through perceiving and behaving which, in turn, influences future perceptions and behaviors. One can choose to study only behavior or only the perceptions and meanings that make up the individual's phenomenology, but this in no sense narrows the human phenomena, it simply narrows the focus of inquiry.

EXPANDED PERCEPTION

Perceptual distortions can be readily observed during interpersonal relationship. Behavioral repertoires are limited or expanded by the amount of experience, practice and reality testing available. Perceptual repertoire are also formed in this way, and a major portion of meaning has this evaluative quality. Perceptions and meanings tend to be positive or negative i. e., good or bad. Expanding of perceptual facility is therefore available from two dimensions: (1) quantity of experience, and (2) reality testing for the opposite evaluative pole i. e., the other side of negative or positive. Encouragements to perceive diversity, and label the bi-polar aspects of meaning will increase and expand perceptual facility. In practice this should improve the quality of communication while its repetition should improve communication skill.

It is intriguing to speculate on the potential pairing of two aspects vital to employability: (1) knowledge and attitude toward work function (content) and (2) communication skill (process). One could easily assume some degree of stimulus response effects to take place. When a youth talks to an adult authority and the topic is work, employability attitude or work rules etc., the content is associated with the process or communication style reserved for adults. As one is restricted so the other will tend to be restircted. If on the other hand perception is expanded and communication skill thus improved, restrictions to the content are reduced. The interpersonal interactions of peer groups then could be expected to yeold improved interaction and communication with employers.

It is widely held that one's attitude toward others improves one's attitude toward self. Also, if we feel good about ourselves, we tend to feel good about others. Further, that personal attention, identification and positive support from others plays a large part in producing good feelings about ourselves. Attention, interaction, understanding and mutual support of group members therefore, should yield the potential for improved attitudes toward others -- perhaps all others. Group counseling experience then, should bring about attitude changes to the positive in the members and with it expected behavior changes. One could speculate that the behavior change could be observed in reduction of defensive (negative) behavior relating both to the job, the employer, the NYC administrative program, and to the general community at large.

PART II

THE STUDY

There were five treatment groups and two control groups in each of four sample clusters; two for each city. The treatments were represented by the models. The two control groups were of supervised self instruction in a group setting, and of no treatment. There were four counselor teams, one for each sample cluster and each team used each of the five treatments (models). The groups met for two hour sessions, twice weekly for two months. They were pre and post tested and observed for other social behaviors during the counseling period. The following is a detailed description of the models (treatments), expected outcomes, and research design.

THE MODELS

There were five models identified as: Problem Identification, Intrapersonal, Interpersonal, Perceptual Modification, and Relationship. The models had four basic dimensions: Desired Behavior, Intermediate Behavior, Focus, and Counselor Method. Each model utilized each of the dimensions but varied the implementation.

There were four Counselor Methods which were also constant across models: Task Prescription, Selective Responding, Modeling, and "Other-Rapport" statements.

Each model was thus unique in the way dimensions and methods were applied. The model desigation determined the purpose and style of application. The dimensions and methods are described in terms of each model. Actual statements were taken from counseling sessions to describe how dimensions and methods were typically applied to the model. Five models, four dimensions, and four counselor methods are thus defined.

THE DIMENSIONS

DESIRED BEHAVIORS: These are the behaviors desired of group participants during the group counseling process. They are the ends toward which all of the other components of the model are directed.

INTERMEDIATE BEHAVIORS: These are observable changes in behavior which, while short of the desired behaviors, represent progress in the expected direction. These steps in the direction of the desired behavior are sometimes referred to as successive approximations and are signs of hoped-for growth.

FOCUS: The focus of the counseling model is essentially equivalent to the content to which the group attends. The focus may be upon such content as perceptions of self, realistic demands in the world of work, feelings about authority, etc. The focus of the model was selected for its relevance to the desired behavior.

METHOD: A method is a particular way in which specific content is accomplished. In addition to the more "free Wheeling" discussion statements (Other-Rapport), three specified methods were used to develop specific content. These methods were: Task Prescription, Selective Responding, and Modeling.

Task Prescription: A task prescription is the explanation of an activity which is to transpire within the group. In each of the models, the counselor wished for the members to be involved in certain tasks. These tasks were of three types: 1) Those which called for the group participants to engage in a discussion of a topic, for example, "Let's talk about ourselves and what we want," 2) Those tasks which called for a specific, structured activity in which the group was to engage for a period of time. To initiate such a task the counselor might say, "We will role play our problems and the various people involved," and 3) those tasks which call for expansion but do not specify or limit the direction. For example, "Tell more about that."

It is apparent that the second type of task is more specific and calls for clear directions from the leader as to how members are to proceed in completing the task. The other tasks are less clear and completion relies more upon the subtle verbal and non-verbal cues of the leader. The more subtle ways in which the leader facilitates task completion are selective responding and modeling.

Selective Responding: One of the most important methods employed by the counselors was selectively responding to client behavior with verbal and non-verbal social reinforcement. That is to say, when clients demonstrated a desired behavior they received a positive response from the counselor. When an unwanted behavior appeared, the counselor's response was inattentive. Selective social reinforcement, both verbal and non-verbal, was given contingent upon the client's emitting the desired behavior appropriate for each model. When a client showed a desirable behavior, the counselor offered a positive response. Empathy, reflection, clarification, and praise were the more common forms of positive social reinforcement employed as part of the selective responding method. A counselor might socially reinforce role playing behavior with the statement: "Very good, Charles," or a sequence of client talk about his aspiration with ,"You would like to be a teacher, but feel uncertain about having the money to get to college?"

Modeling: The phenomenon of modeling in group counseling is the process of group members copying or mimicing certain behaviors in the group leader. Various approaches to modeling have been employed in past research. For example, video tapes of ideal client-counselor interactions have been used for illustrative purposes to help define the role that the client could play during counseling. Modeling was employed as a method in all five of the group models. In some group models the counselor assummed the role of a client and acted out the behavior desired in the client as an intermediate or outcome behavior.

It must not be assumed that modeling is always an explicitly defined process. In some of the group models, it occurred without ever being openly discussed. An expression may be implicit in the counselor's behavior and mimiced, many times unconsciously, by the client. Appropriate client imitation was then often followed by social reinforcement.

These methods of facilitating groups, i.e., task prescriptions, selective responding and modeling were used in each of the models. The combination of task prescription, modeling and selective responding can be seen in relation to role playing. The counselor may prescribe role playing, model a part, and selectively reinforce the client for his role enactment. It will become clear in later discussions that particular methods were emphasized more in certain models and that the instructions for methods to be employed were more specific and detailed in some models than in orders.

PROBLEM IDENTIFICATION MODEL

This model is characterized by personal support provided for a member through the identification and concern of the group with his problem (s). A problem presenter is designated. He presents a problem of his own choosing and gives a brief description of significant individuals associated with the problem. This occurs within the context of an on-going group. The problem situation is then set into a drama with implications discussed in the group.

DESIRED BEHAVIOR: The identification and conceptualization of problems, and the conceptualization and expression of multiple alternatives for given problem situation. Examples of desired behaviors of this model are:

1. "It seems I always get angry with her and start acting like I'm guilty."
2. "Mr. Stanton tries to explain how I could do the work better, and I feel like he's putting me down, so I get mad and don't go to work the next day."
3. "I could wait 'til my dad gets through talking and then try to understand how he feels. Maybe some of the things he says would be good for me."
4. "I tried studying for two hours yesterday, during study hall and while I was waiting for the bus."

INTERMEDIATE BEHAVIOR: Examples of intermediate behavior are:

1. Identifying problems in general.
2. The presentation of a major problem by a designated member.
3. Identifying with the presenter and his presented problems by other members.
4. Learning the role playing technique from counselor model presentation.
5. Role playing problems and solutions to the presenter's problems by group members. Each member participates. That is, each individual plays some role, except the

presenter, and this role playing continues as long as it is productive.

6. Presenter's feedback to the group (positive only) on the selection of alternative solutions he has observed.
7. Presenter's report on his attempts to use new alternatives and members' support for his attempts.

FOCUS: The focus of attention in this model is the problems which group members experience outside the group, their enactment within the group, and alternative courses of action.

METHOD: The tasks employed in this model are role playing, role switching, and alter-ego. They are, in general, the techniques used in psychodrama. Selective responding is reserved for the discussion and interaction following the drama. Modeling is done at this time, but also, when appropriate, as a role playing member. The role playing is designed to allow projections to emerge from the drama rather than from verbal discussion and recall of there-then projections. The problem presenter describes only enough of the situation to allow other members to begin. From then on, projections emerge as new as the problem presenter and members become involved in re-inacting the situation and later discussing it. The counselor uses his methods to encourage this goal and adapts his task prescriptions, selective responding and modeling to encourage this process.

Task Prescriptions: The following are examples of Task statements used to initiate and facilitate the process. They are general tasks, tasks for initiating the role playing and role switching and examples of alter ego comments:

General Statements:

1. "Every person has problems. What are some of your problems?"
2. "Talk about the problem or problems you have."
3. "Listen carefully to other's problems."
4. "Listen to, and attempt, some of the alternatives offered by members."
5. "Role play problems and possible solution alternatives."
6. "Pick out someone you want to role play your parole officer."
7. "The thing we do in here is to go ahead and discuss the problem and try to find out what is going on."
8. "How would you have handled the problem?"
9. "Tell us one way you could have behaved differently."

Role Playing:

1. "John, Let's do yours, I'll be the interviewer."
2. "Okay, let's play that. You want to be the girl?"
3. "Why don't we play that right now? You pick someone to be your sister."
4. "I'd kind of like to get a better idea of what you're saying. Let's role play it."

Role Switching: In this procedure, the problem presenter exchanges place, both physically and in terms of role, with some other participant who has been playing a significant person associated with the presenter's problem. This is done for three reasons: 1) To provide an opportunity for the presenter to interact with a representation of himself in order to see himself as others see him, 2) To help him better define what it is about the significant other that contributes to his problem, and 3) To allow another participant in the group to identify with the problem. Examples of counselor statements are:

1. "Why don't we switch right here? You be your mother and Willow will be you."
2. "Hold it. This is a good place to switch."
3. "Is that the way he really is? Why don't you play the boss and show us what he's like?"
4. "Okay, now we're getting somewhere. Now you be yourself again and let him be the teacher."

Alter Ego: The counselor and co-counselor assume the roles of the alter-ego for the presenter of the problem and the other group participants. The counselor always stays with the presenter, and the co-counselor switches from participant to participant as each new role emerges during the interaction process. The purpose of the alter-ego is to detect and express aspects of the participants' messages which are significant but unspoken. The talk of the alter-ego is occurring concurrently with the interaction of the participants. Both alter-egos speak softly, but sufficiently loud enough to be heard by all participant's. Their comments may be directed toward the individual participant's affect, behavior, or intent with the consequence of new leads for conversation and added depth to the discussion. Examples of the statements are:

1. "I am getting angry."
2. "She wants me to feel guilty."
3. "I wonder why I'm lying."
4. "He doesn't care about me."

Selective Responding: The counselors will intervene to positively reinforce (acknowledge and reward) the following behaviors: Talking about personal problems, generally in the second session; specifying and discussing a major problem in subsequent sessions; the presentation of a major problem by the designated member, in each subsequent session; questions, identification, and useful contributions through role playing, in each subsequent session; and positive feedback to the group by the person who presented the problem in each subsequent session.

Examples of counselor statements are:

1. "That is a difficult situation, John. You're very upset aren't you?"
2. "And so you felt very guilty for getting mad."
3. "Mary Anne, you're very perceptive. You role played his teacher perfectly."
4. "You, too, have had that experience. You really understand his situation.

Modeling: Examples of counselor modeling statements for this model are as follows:

1. "Whenever my boss tells me to compile a report, I get angry and put off doing it until the last day. Then I don't do a good job of it, and blame him."
2. "Okay. I'm going to role play myself. Charles, you role play my son. 'Son, why in the hell can't you get home at the hour we agree upon...I see... we don't agree. I tell you when to get home.'"

INTRAPERSONAL MODEL

This model is not distinguished by any procedural technique such as role playing or a fixed interval reinforcement schedule. The essential characteristics which distinguish it from the other four models is its content focus. The Intrapersonal model is focused upon the self and self aspiration. Where the Interpersonal focus is: "What happened?" The Intrapersonal focus is: "What do you want?"

The Intrapersonal model seeks to bring more similarity or identicalness between the self and the ideal self, i.e., the self as the individual believes and experiences himself to be, and that self which he would ideally prefer to experience. The emphasis is upon the exploration of both negative and positive aspects of the self. Thus, a fuller awareness occurs regarding the nature of the self in terms of affect, cognition, and behavior. The ultimate consequence is a clear approximation of the state where the individual experiences himself as adequate and capable of coping with himself and his environment, and of accepting the responsibility for doing so. The assumption is that where incongruency exists, anxiety exists, and as a consequence, the individual's reactions or behavior is restricted. Further, as congruency is achieved, the individual becomes more spontaneous and creative, in both cognition and behavior, and thus brings more of these elements to his interaction with the environment.

DESIRED BEHAVIOR: The awareness of self and self-awareness. The facility to verbalize introspections of negative and positive feelings relevant to the "me," "not me," and "the wanted me." Examples of desired behavior statements are:

1. "I want to be a teacher, but I'm afraid I can't cut it. . . I don't have what it takes. Sometimes I think I'm dumb.
2. "She says I'm always mad, but I'm not. But I get mad a lot, especially when I'm afraid of something.
3. "I want to be liked, and I want to like other people. I don't want to spend my whole life feeling like nobody likes me."
4. "Every time I do something good, like school work, and somebody says it's good, I feel bad, like I've conned them, fooled them some way."
5. "My husband is a Negro, you know, and sometimes I feel ashamed to go places with him. And then I feel bad. . . guilty I guess. . . I love him, and I don't want to feel ashamed because I know he must know and feel hurt."

INTERMEDIATE BEHAVIORS: Though these behaviors are successive and approximate to the goals, they need not occur sequentially in the sessions. Examples are:

A. Thoughts and feelings about self.
B. Thoughts and feelings you have about yourself when you do things that seem to be unlike you, or that you don't want to do (like procastination, hating, running away, feeling anxious, afraid, etc.)
C. How do you feel about your chances in the future?
D. What are the strongest feelings you have about yourself?

E. Compare "C" and "D" above.

FOCUS: The content or focus of this model is the perceptions of self and self-aspirations which are held by the group members. The content is not what happened or is happening outside the group but, "How do I see myself right now?", and, "What would I like to become?"

METHODS: Task prescriptions, selective responding, and modeling are used as encouragement for verbalizing and desired behavior statements. Role playing is not used. The process involves encouragement for member verbal interaction in self exploration and listening.

Task Prescriptions: There are general statements for initiating the process and more specific task statements that are used to facilitate the on-going process.

General Statements:

1. "Try to recognize the feelings you have about yourself."
2. "Tell us what you are really interested in."
3. "What abilities do you have? What would you like to be able to do?"
4. "What barriers stand between you and what you would like to be?"

On-going Statements:

1. "Do you see yourself as a guy who says what's on his mind?"
2. "Tell more about that. What else do you want from a job?"
3. "How would you like to be with your friend? What would you like to be able to do?"
4. "You wish you could do that well. How would you feel then?"

Selective Responding: When desired behavior statements occurred, counselors gave verbal and non-verbal recognition, affirmation and attention to them. This was usually in the form of restatement or clarification and probing questions either separately or in combination to either content or feeling. Examples of these statements are:

1. "You feel hurt and angry. You feel put down."
2. "You want something more from life: to be a lawyer; to help others who need it. But you are afraid you can't make it through college."
3. "What was that? Say that again. It was very perceptive."

4. "Now you are beginning to understand yourself, to see that you can really do what you want to, even though you may be afraid."

Modeling: The counselor models the type of verbal behavior desired in the intermediate and outcome goals. Examples are:

1. "I don't want to be that way, but I'm a little hung up on intellectualism."
2. "I'm not sure about my own feelings about dealing with other people."
3. "I usually wait until something gets so big in me that it just bursts out."
4. "If I could be like I want to be, I'd really try to tell somebody when they bothered me, instead of just bottling it up inside."

INTERPERSONAL MODEL

This model focused upon the stimulated recall and verbal presentation of extra-group, past (there-then) interaction between persons. Group members were asked to describe their perceptions of important need-press situations which they have faced. The emphasis was upon environmental expectations.

The term interpersonal is traditionally used to denote interaction between group members in the present (here-now), and usually includes the expressions of aspirations. No support was given to the discussion of aspirational elements. The focus was upon environmental expectations and the dichotomy of "I do, but they expect." Self-aspiration and here-now types of verbal interaction were the focus of two other models: Intrapersonal (self-aspiration), and Relationship (here-now).

DESIRED BEHAVIOR: Awareness of environmental expectations and reality-testing. Examples of desired behavior statements are:

1. "They're gonna make me do everything at home, whether I want to or not. You can't say you don't want to."
2. "I can't go up there, because he'll think I want to come back."
3. "His mother never did want him to marry me. She's tried hard to make him hate me and all these dumb things. She wanted me to be worse than her."
4. "My mom gets whatever she wants. As long as I stay there I gotta do what she wants and let her be the boss."

A sequence example:

M1: "I've only got one interest now, and that's where
I work they've got these IBM machines. They're
always using them, but they don't have time to
show us how to use them." (other)
C: "Do they expect you to know how to run the
machines?" (Task prescription)
M1: In due time, yes. They don't really expect us
to, but they would like us to and we can't if
they won't teach us." (Desired behavior)

INTERMEDIATE BEHAVIORS: The following behaviors were considered successive to the goal, but need not occur in sequence: Expectations in the environment; self-references about behavior occurring in needpress situations; comparison between behaviors and environmental expectations in given situations; coping behavior, ignoring, rationalizing, avoiding, escaping, displacements that occur in need-press, frustrating situations including adequate coping and reality testing; and evaluation of behaviors as mentioned above.

Examples of these statements are:

1. "She wants me to get home by twelve. If I don't we argue about it next morning."
2. "I know that I'm going to have to work harder to make it at my job. I know they think I'm goofing off, and I am."
3. "Well, I'm always giving excuses. Every time I don't do what I'm supposed to, I tell them a cock and bull story, but I don't fool me. I feel stupid."
4. "I just don't go back. I work until it blows over. I don't though nobody says much, but I know that what was wrong is still wrong."

FOCUS: The focus of this group is upon significant interactions with people outside of the group and more specifically upon the expectations held by others for the group member in these interactions.

METHOD: The process was that of verbal interaction, the identifying of expectations, describing what is done in problem situations, and the difference between what is done and what is expected. To encourage this process, the counselor used task prescriptions, selective responding, and modeling.

Task Prescriptions: Task statements were of two types: general and specific. Examples of these counselor statements are as follows:

General Statements:

1. "...what is expected of you in various situations."
2. "...what you actually do in these situations."
3. "...the difference between what you do and what is expected of you."
4. "...what you do regarding differences between what is expected and what you do."
5. "...what works and what doesn't work very well."

On-going Statements:

1. "That is what we want to do here: talk about problems that come up with other people."
2. "What I am interested in is what you could have done in that situation. Does anybody have any ideas on that?"
3. "What did your parents say when you told them you weren't ready for these responsibilities?"
4. "What are your parents going to say if you don't get a job and end up lying around the house all day?"

Selective Responding: Selective responding was to the desired verbal behavior with the techniques of verbal and non-verbal attention to both content and feeling. Examples of counselor responses are:

1. "So he expected you to take it, because he figured you would act like a slave."
2. "It bothers you because they think you should be married by now."
3. "She really doesn't give you a chance to do those things, and that's why you don't like to be around her."
4. "So your mother expects you to kind of support the family, Bernie?"

Modeling: The counselor's verbal behavior is the stimulus for imitation on the part of the group participants. Examples of these statements are:

1. "I think the thing that bugs me most is when I'm expected to carry out an order that isn't my own."
2. "It really makes me mad when someone wants me to be something I'm not.

3. "You're always expecting me to say something, and I'm never sure what it is. You really keep me wondering."
4. "I wish I could work out something like that with my wife, but she expects me to work too."
5. "My in-laws sure do get in the way sometimes. They can mess things up pretty bad."

PERCEPTUAL MODIFICATION MODEL

This model seeks to expand the perceptions that participants have of significant others and authority figures, as well as self-perceptions, to include a greater positive element. The assumption is that coping behavior will improve with expanded and positive perception. Group members were asked to verbalize their perceptions. The counselors reinforce this by responses such as, "You noticed... then," and, "You could see that..." The desired behavior is added and more positive perceptions and verbalizations of meanings.

This is perhaps the most structured model. The structuring of sequential content, expressly designed and implemented through each session, is the feature which distinguishes this from the other models. The sequence of content and tasks through the various sessions are: 1) self-description, 2) self-description affect, 3) authority affect, 4) one meaningful authority, 5) one authority affect positive, 6) authorities in general affect positive. Within this structure the perceptions of self are also attended to, and the intent is to move from negative to positive self-referents.

Another distinguishing characteristic of this model is the use of a co-counselor as a fixed-interval summarizer. His function was to write down statements of the participants which were relevant to the model focus, and to then summarize them for the group at the end of each twenty(20) minute period. During the early sessions when positive responses were at a minimum, he also summarized negative comments, but emphasis was placed on positive perceptions of self and others. By the eighth (8) session he discontinued inclusion of negative statements in his summary. Further discussion of this function follows.

DESIRED BEHAVIOR: Expanded and increased positive perceptions of self and authority figures were the behaviors desired from this model. Examples are:

1. "Mr. Stanton tries to explain things to me. He's my boss, my supervisor, and he really tries to help me."
2. "The truth is, I can make better grades. I do whenever I try."

3. "Actually I am a good athlete, I do real well. I try to hold up my end of the work."
4. "All cops aren't bad, or mean. Sometimes they are pretty good guys. One of them helped me get my car out of the sand when I was stuck."
5. "I try to be pleasant, and I type good. At my job I work hard, and Mrs. Johnson tells me I will make a good secretary."

INTERMEDIATE BEHAVIORS: Verbalizations about the following topics were considered evidence of growth in the direction of the desired behavior goals: Perceptions about self; positive perceptions about self; perceptions of experiences with authorities, i. e. , employers, teachers, parents, police, etc. ; positive perceptions of experiences with authorities; identifying the most meaningful authority; and perceptions of this authority.

FOCUS: The model sought expression and description of member perceptions of behavior in self and authority. Verbal interaction was encouraged and counselors tried to make responses which would encourage a member to notice more, and more positive behaviors that have occurred. Group members were asked to describe what they saw and counselors gave response in order to encourage a member to "see more" and include "more positive." The focus was upon a members facility to "notice" and describe their perceptions.

METHOD: Task prescriptions, selective responding and modeling were also used in this model. Social Reinforcement for desired behavior statements was emphasized by including both on-going selective response and a fixed interval response through a counselor summary after each 20 minute period. The two hour session was then divided into 20 minute segments with general task statements to begin each segment.

Task Prescriptions: The task prescriptions were for topics of: Discussing perceptions of self and authorities, and listening to co-counselor's summaries of each 20 minute segment of the session. Counselor used both general and on-going task statements. Examples are as follows:

General Statements:

1. "There are two things that are important to us that are related to how we get along in the world; how we see ourself, and how we see other people who are important to us.

2. "People who are important to us may be individuals

who hinder or hurt us, or who help and like us."
3. "Let's talk about the things we notice about our own behavior and the behavior of others, especially those people who we see in authority."

On-going Statements:

1. "Did you see the cops as being unfair to you when they took you to the station?"
2. "What did you see him doing that made you think he was right?"
3. "Can you describe how you felt about the people these words suggested?"
4. "What are the good things about you? What do you do best?"

Selective Responding: Two kinds or classes of perception were reinforced: Expanded and positive perceptions of self, and expanded and positive perceptions of authority. Two types of social reinforcement were used: immediate and variable, and fixed interval in the form of 20 minute summaries. The counselor did immediate response only. The co-counselor was responsible for taking notes during the period and giving the fixed interval summary every 20.minutes. He noted what was said and by whom. Following each 20 minute period, he would intervene to acknowledge the desired Verbal Contributions of the members and give attention to those members who made them. Following are examples of counselor and counselor immediate response, and counselor summary response:

Selective Response (Immediate):

1. "You notice Mr. Stanton tries to be helpful."
2. "You know, you really are a pleasant person to be around."
3. "You see yourself as competent in that."
4. "You see her being concerned and interested in you and you notice that you like her."

Selective Response (Summary):

1. "Bill, you said that you got along real well with your ninth grade history teacher because he made an attempt to understand you. I think that was an interesting statement."
2. "Excuse me just a moment: Jane, you noticed Mrs. Johnson tries to help you become a better

> secretary; you noticed also that you like her. Very good. Charles says that his supervisor taught him how to operate a lathe and now you feel competent and are feeling pretty good about your work skills. Ramariz, you see yourself as more intelligent than you used to think, and you've noticed that your father takes pride in you. That makes you feel better about him."

Modeling: Modeling played a relatively minor role in this model. However, whenever counselors felt it to be useful, they made statements to provide imitation stimuli. Some examples of this are:

1. "You didn't seem to me to be the type of person who would really have trouble saying what was on her mind."
2. "I noticed that my son really tries to be friendly with my friends."
3. "I'm getting better at identifying the things I do well, and this is a lot more than I previously thought."
4. "I don't see myself as a frightening person."

RELATIONSHIP

The model sought to improve the communication skills assumed to enhance and create, meaningful and personally supporting relationships with others. "Single messages", appropriate "Self disclosure", and "a Feedback quality" were emphasized to develop increased sensitivity to others and communication with "feedback loops". Omission from feedback were considered to be the prime reason why self disclosures are feared and generalized, guilt anxieties developed. More appropriate self disclosure was considered possible from skill practice and the experience of meaningful feedback. There were three assumptions involved: 1) "Single messages" are more comfortable than "double messages", 2) feedback is more comfortable when it includes "top-bottom" evaluative limits, and 3) messages are more comfortable as they are more complete descriptions with less (self disclosure) omission.

Messages sent are always a combination of "telling" and "asking". Also, there are always feelings and motives which accompany the statements which the receiver perceives either as intended or as he may guess them to be and replies are formulated in terms of the message as perceived or guessed. Communication is thus a process of message exchange designed to share perception and discover the reality around us. Clear evaluations by others helps us to establish our own behaviors more clearly. Omissions in feedback, however, tend to make us unsure, frightened and anxious about who we are.

Bi-polar feedback (most positive and most negative) was thus assumed to be helpful for self understanding. The negative evaluations when coupled with the positive aspects were encouraged. Omissions of any kind were discouraged. The focus for the model was reduction in "omission messages", increased use of "Single messages", "complete messages", and "top-bottom feedback."

DESIRED BEHAVIOR: Increased sensitivity to quality messages during communication and more quality "feedback loops"--a reduction in use of "incomplete and double messages", and an increase in messages which are "single and complete".

Complete and Single Messages: The message has less omission when it includes the perception, the feeling, and the motive. The use of the word "because" may yield a rationalization we will disagree with, but it does reveal the aspect current to our thinking. A single message is best conveyed by: "yes", "no", "I don't know", or "I tend toward". If two are present, the message is reduced to confusion and the receiver's uncertainity or guess. Examples of more complete and single messages are as follows:

1. "I feel much better than I did, because I think I know him better."
2. "I think the same, because I have three sons and I'd like for them to have a father."
3. "You make me sick. You always talk about your sister, instead of yourself. I'd like to know something about you."
4. "You make me nervous. You look mad at everybody. I'm worried you're mad at me too."
5. "Outside of here you yak, yak, yak, all the time, but you get in here and you don't say anything. I think it's because we all know we can say anything, so we can't think of a thing to say."
6. "We're all sitting here and fidgeting and doing nothing, and I feel like I'm going nuts just sitting here. It's stupid!" (Perception-Feeling)
7. "See, now you're sticking up for her, because she finally hit on something that you want to talk about." (Perception-Reason)
8. "I don't want to get to know you, because you strike me as the kind of girl who would take advantage of me. She gets her revenge by killing you with kindness." (Perception-Feeling)
9. "I'm afraid that you don't feel part of the group, because you're not Mexican or Negro." (Perception-Reason)

10. "You want him to know you for the simple reason that you went to him for help." (Perception-Reason)

Incomplete and Double Messages: Double message often use the word But, or However with the two parts of the message thus divided and cancelled. Also, double messages often mix the verbal and non-verbal communicative media. Incomplete messages give only one of the aspects present such as "no", or "yes", or "why do you do this" without the inclusion of feeling or motive. Examples of double and incomplete messages are as follows:

1. "That's a good idea, but it won't work."
2. "I won't work there anymore, that's all."
3. "You know how to get a job, but you'd never get one from me doing that."
4. "Those counselors try to help, but they never listen to you really."
5. "I'd like to have a job, but why work--tell me that."

INTERMEDIATE BEHAVIORS: Behaviors which were sought as valuable and intermediate to the desired behavior of single and complete messages or feedback loops were as follows: verbal expression, listening, responding with evaluation, responding with description, responding with top-bottom description, and self disclosure.

FOCUS: The focus for the group meeting was upon verbal exchange and the defined Quality Communication. Feeling expression was encouraged and the topics were encouraged as "here-now" descriptions. It was focused upon what transpired in the group rather than explanation of "there-then" events.

METHODS: Task prescriptions, selective responding, modeling and a structured feedback setting as "Hot seat", or "Feedback chair" were used. The feedback chair was scheduled for (4) of the (16) sessions but allowed for use at anytime a member requested it for personal feedback. A specific chair, generally selected by the counselors, was designated. During these sessions each participant took his turn sitting in the chair in order to gain feedback from other members. As each member took his turn at sitting in the chair, he listened without responding while other members gave their most positive and most negative perceptions of him. The participants were permitted one negative and one positive statement each. These statements were tasked as short and as complete messages.

Task Prescriptions: Again, the task statements were of both a general and initial kind and also for more depth on a specific topic or discussion. Specific task statements were also used to initiate the feedback chair and remind members about the ground rules for its use. Examples are:

General Statements:

1. "Talk about yourself as honestly and freely as possible."
2. "Listen carefully and respond honestly to what other members say."
3. "Disclose and discuss feelings and ideas that are important to you right now, especially as they have relevance to another member or to the group as a whole."
4. "Make others want to listen to you."

On-going Statements:

1. "It's good to tell us what you see here, we want you to tell us the feelings, too."
2. "It would be more meaningful to you if you'd bring up something of yourself."
3. "Why do you say that?"
4. "I don't think John knows what you're driving at. Can you make that more clear? What do you mean to be saying?"
5. "Now, which do you mean--you do feel good about it, or you don't--What are you saying to John?"

Tasks for Feedback Chair:

1. "Give your response later, try to hold it until everyone's finished."
2. "What is your stinger?"
3. "Make the statement as short and complete as you can. Be sure to include both stinger and stroke."
4. "Okay, so you can't think of a stinger. If you did know one, what would it be?"

Examples of "Top-Bottom" Feedback:

1. "Well, you are friendly. You talked to me right off, and that made me feel comfortable. My stinger is, you interrupted me when I was talking, and it made me a little mad."
2. "You talk to me, but you don't look at me when you do. I don't like that. My stroke is, you really know how I feel, and you help me say what it is I feel."

Selective Responding: Counselors gave attention and response to single and complete messages as they occurred during the on-going interaction and also during feedback chair sessions. Response was frequently for successive improvements which varied in level among the various members. Clarification and mild probe were frequently used in response such as: "That seems to be a difficult thing for you to say. You're trying to tell us that you're afraid of Bill's reaction, is that it?" or by non-verbally looking directly at the member, leaning forward and coaxing with hand motions and the like. Whenever interaction-rapport permitted, counselor would say something like: "You know, George, it seems to me that you're really honest there." Other examples of on-going responding are:

1. "I think he said that because he does have those feelings."
2. "You say you don't mind talking about things, Mike, but when it gets down to it, you close us out."
3. "You feel left out, and we have ignored you."
4. "So you feel that you can be more yourself now and talk about your feelings, since you've seen that the group is interested in what you think."

Modeling: In the counselor's modeling, he used the desired behavior characteristics of single and complete messages. He was a continuing model in his verbal and non-verbal behavior since he was more an actual participant than in other group models. Examples are:

1. "I don't know why I feel kind of nervous right now. I guess because I think I might have made somebody mad last week."
2. "It upsets me because you won't talk about yourself, because I care about you and want to get to know you better."
3. "I like to see you support him like that. It makes me feel that the group is really going some place now."
4. "It bothers me when you push your chair back like that. It makes me feel that you don't want to be part of this group."

THE GOALS

The Goals for Counseling were established as the increase of employability behaviors among enrollees. This seemed consistent with the overall aim of the NYC program. We wished to add a new experience (Model Group Counseling) to the on-going program to see whether the added experience would further enhance this goal.

The NYC program hopes to develop increased employability among enrollees through planned work experience and personal management counseling. If the enrollee is in school, 10 to 15 hours of work experience are planned. If he had dropped out of school, he may enter the program of 30 hours of planned work experience. This study tried to assess the value of exchanging a portion of the work experience for group counseling experience and to look for the effects of this exchange in manifest employability behaviors. The assumption was that increased employability is present when there is an increase in expanded perception, communication skill, and good feelings about self; that manifestations of this behavior would yield more general social behaviors approved of by others. A further assumtpion was that as certain specified behaviors occurred during counseling, the employability behaviors, so defined, would thus appear after, during and external to counseling.

The independent contingencies were, therefore, the specified desired behaviors of counseling; the repetition and expansion of verbal expressions as defined for the model. The dependent contingencies were expanded perception, communication skill, good feelings about self and more approved social behavior. In the study, five models were specified, each with a separate desired behavior contingency. The outcome contingencies, the same for all models were then observed with inference and association of Desired Behavior and outcome. Where increase in outcome (dependent contingency) variables occurred, increased employability was assumed. We looked for change in outcome variables from inspection of the assigned criterion measures for each outcome variables. Expanded perception (meaning) was appraised through a word association test which we developed after a futile search for a more standardized instrument to meet this need. For communication skill we used a simple count of direct member-to-member response occurrences during a test (group) interaction setting. For attitudes we tried two standardized tests but felt uncertain about their usability with our populations, so we added a sixteen point direct questionnaire which we designed for the purpose. We appraised social behaviors from NYC and court records.

The design thus seemed to be clear. We exposed enrollees to the counselors encouragements for increased desired behavior statements and then observed their behavior in four areas which were defined as employability. The independent contingency was the Desired Behavior of the model. There were five. The dependent contingencies were the outcomes: Expanded perception, member-to-member responding, attitudes, and social behavior. The question also seemed clear. Which Desired Behavior produced which outcome? The basic scheme would also allow a number of other questions concerning qualities, degrees and combinations which could be either answered or suggestive for further study.

Three additional questions seemed important. One concerned the extent to which counseling with some of the identity group could become supportive to the total identity group (NYC enrollee) irrespective of the counseling or the desired behavior experienced during counseling. For this we looked at the behavioral records of each enrollee in the program and compiled this record for a two month period prior to counseling and again for the two month counseling period. Inferences were then made under the assumption of equalness in other variables between time periods. This, we knew, did not provide enough control for definitive findings, but did seem to serve the purpose of showing potential areas for further research. The second question concerned the counselors and their sense of satisfaction in operating with the models. For this, we developed a session by session diary form and brief attitide scale. The third question concerned the describing of the various models in process. For this we used tape recording of each session and developed categories for tape raters to listen to the tape and record quantity and timing of the various counselor and group member statements.

RESEARCH DESIGN

Thirty-two counseling contact hours were planned for selected youth who were current enrollees in Neighborhood Youth Corps Programs. The enrollees included both male and female in both in-school and out of school programs. The counseling contact was planned for small groups of eight with two counselors for each group. The groups met for two hours each session with two sessions each week for a period of two months. The counseling time was considered as an alternate to normal work time. They were paid as they would be during work. There were five specified counseling models as the experimental groups and two types of groups for experimental control. The groups were assembled on the basis of travel time in the case of the Phoenix out of school population and early or late dismissal time in the case of Albuquerque in-school population. Each group included both males and females. In Phoenix, the ratio was five females to three males. In Albuquerque, the ratio was five males to three females. Groups were then assigned intact to one of seven groups within the cluster, with counselor teams assigned to a cluster by a flip of the coin.

Enrollees were pre and post tested. The generalized goals were: expanded perception, communication skill improvement, attitude change, and changes in socially relevant behavior. The criterion instruments were two standardized scales, several non-standardized questionnaires and behavioral reports by NYC programs and juvenile courts.

Comparisons were made between experimental and control groups using analysis of variance techniques. Descriptions of the session by session process for each model were made through ratings of behavior as noted from scoring the audio tape recordings of the counseling sessions. The estimates for socially relevant behavior change were made by comparing data obtained from NYC and juvenile court records for a period of two months prior to counseling and for the two month counseling period. Counselors' evaluative impressions of the various models were obtained from attitude scales and diaries recorded after each session.

THE POPULATIONS

The Research samples were taken from two cities and four population clusters, each representing a counseling site. Seven groups were selected and randomed to models for each cluster-population. There were five counseling groups, one for each model, and two control groups, one working on self instruction materials in a group setting, and the other with no treatment.

The cities were Phoenix, Arizona and Albuquerque, New Mexico. Clusters in Phoenix were established by geographic population areas out of southern and northern portions of the "inner city". Clusters in Albuquerque were established on the basis of early and late school dismissals. Their designations had been made by school and NYC officials for the enrollees. The categories were based upon work time assignments. Total enrollees were equally distributed between categories.

The Nieghborhood Youth Corps enrollees in Phoenix were public school drop-outs. In Albuquerque, they were in-school enrollees who were on the job ten hours per week. A total sample of 243 included 112 from Albuquerque, and 131 from Phoenix. There were 19 replacements for enrollees who dropped out during the first four weeks of the study.

The counselors in Phoenix were members of the research project staff. Having helped to determine the models and model procedures, they were thoroughly and extendedly trained in their use. The Albuquerque counselors were selected, upon administrative recommendation, from those who were seasoned and experience school counselors and who have volunteered for the research. Albuquerque counselors were intensively trained for a period of three weeks.

The samples and treatment differed in these ways between cities. While treatment was equivalent in all other respects, the data were collected and treated separately.

The Phoenix treatment groups were stratified by sex and driving time distance from two established counseling sites. Eight enrollees, five females, three males, were selected in terms of availability to the driving run. Seven groups of eight were thus established for each of two counseling sites. The seven groups were then randomized to counseling models and controls with a coin flip determining which of the two counselor teams would handle a particular cluster of groups.

Administrative difficulties necessitated that the non-treatment control group for one of the clusters include five enrollees who were full-time in attending MDTA training as nurses' aides. The other seven control groups, however, followed the randomizing process.

The Albuquerque samples were selected on the basis of early school dismissal and late school dismissal. From the population of early school dismissals, three girls and five boys were randomly assigned to each model and each control group with the same procedure followed for the late school school dismissals. A flip of the coin then determined which counselor team would work with each cluster. The above-described procedure produced seven groups of eight enrollees in each of the two strata in Phoenix and Albuquerque.

TREATMENT CONTROL

There were five counseling models. Each of the models were assigned to one of the groups in each cluster, leaving two of the seven groups unassigned. One of these two remaining groups from each stratum was utilized as Counseling Control I where an adult monitor was assigned to meet with this group with the same frequency and duration as the counseling groups. During these meetings the enrollees were engaged in self-instruction using materials in reading and arithmetic. (See Appendix 1.) The remaining group of the seven in each cluster was considered to be Control II. This group was pre and post tested, but did not meet for either counseling or self-instruction.

Counseling was scheduled to continue concurrently in each group for eight weeks. The first 2-1/2 days of the first week and the last 2-1/2 days of the eighth week and the last 2-1/2 days of the eight week were scheduled as pre and post testing periods.

Each treatment group met twice each week for two hours each session. Each counselor team worked with each of the five counseling models working with one group in the morning and a second group in the afternoon for each of five days during the week throughout the eight week period. The following diagram shows the schedule. The numbers in the diagram designate one of the five counseling models.

			Mon.	Tues.	Wed.	Thurs.	Fri.
Phoenix	Counselors 1	A. M.	1	2	5	2	3
		P. M.	3	4	1	4	5
	Counselors 2	A. M.	2	3	1	3	4
		P. M.	4	5	2	5	1
Albuquerque	Counselors 3	A. M.	3	4	2	4	5
		P. M.	5	1	3	1	2
	Counselors 4	A. M.	4	5	3	5	1
		P. M.	1	2	4	2	2

Counselors were responsible for the conduct of the session. He opened each session giving the general task and maintained the integrity of the model. The co-counselor was responsible for using the appropriate model technique. but whenever in doubt followed the counselors lead. The co-counselor was responsible for the individaul marginal interviews with members who requested it.

Four methods were utilized in order to assume the consistency and integrity of the various treatment models.

PRE-TRAINING EXPERIENCE: This was both didactic and experiential. There were lecture-discussion periods, tape analysis sessions with frequency counts and descriptions of target input, and personal specification papers prepared by each counselor for his own pre-practice and establishment of model input style. Role playing was a major part of the pre-training. Each counselor team developed short exercises for daily use where tasking, selective responding, and modeling were practiced with one counselor giving the stimuli and the other a practical response.

Each counselor team role played each model several times with other counselor teams playing the role of enrollees. Each session was then followed by a critique and feedback period from the role playing members. Generally they were in sequences of 30 minute role playing and 30 minutes of feedback. Following this experience, graduate student groups and MDTA groups were solicited for practice under video tape. For this practice, the University Counseling Center and Phoenix Employment Opportunity Center were used.

IN-SERVICE MEETINGS: Twice weekly meetings were held with each counselor team. These were brief with every attempt to meet immediately following a session. The meeting times were planned to rotate through the five models. A project member was assigned as supervisor. It was his function to assist the teams in maintaining and improving their response repertoire.

THE WEEKLY EVENING DISCUSSION: Since the populations were divided between two cities, there were two counseling teams in residence in each city. The weekly discussions were thus planned in each city with two teams each. The purpose of the meeting was to allow counselor ventilating, exchange feedback, and allow a monitoring for positive and negative concerns.

DATA COLLECTION

Six variables were defined: 1) enrollee attitude, 2) work supervisor attitude toward the enrollee, 3) member-to-member responding, 4) self-concept, 5) manifest anxiety, and 6) expanded perception about authority, work, and self. A second goal was "Hawthorne" effect to enrollees, total program.

A third goal was description of counselor and member behaviors across time segments and progressive sessions of the various groups.

Counselor behaviors were observed for quantity and kind of counseling input during the sessions: task prescription, modeling, selective responding, off-target, "uh-huh," and "other" statements. Members were observed for Quantity of: Desired Behavior, "other" and positive-negative-neutral, member-to-member responding. (See Appendix 6.) Directly following each session counselors were asked to evaluate the model. (See Appendix 7.) The counselors and co-counselors ratings were than compared for the various models.

CHANGE FOLLOWING COUNSELING: Pre and post tests were administered for all treatment and control groups at the beginning and conclusion of the two month counseling period. The testing consisted of the Tennessee Self Concept Scale, the IPAT Manifest Anxiety Scale, the tape recorded Expanded Perception test,(see Appendix 2), the sixteen point Attitude Scale, (Appendix 3), the Interaction appraisal of Member-to-Member direct responding (Appendix 6), and the content-style group of the Hill Interaction Matrix (Appendix 8).

There were standardized procedures for pre and post testing. The counselor's statements to the group were as follows:

1. Introduces self and co-counselor.
2. Tells of meeting times and dates and distributes 3x5 cards which give the counseling schedule.
3. Asks about transportation--does anyone have trouble here?
4. Co-counselor discusses this with them until solution is acheived.
5. Counseling is considered normal work time for which they will receive $2.50 for each session. Broad statement on counseling as intergroup talks. This is in part a research project designed to make improvements in the NYC program. Tape recordings are confidential and no names are connected to any statements.
6. Discuss the procedures for this session:
    (a) testing
    (b) counseling
7. Ask if there are any questions.
8. Distribute the Attitude Questionnaire, the Anxiety Scale (IPAT), and Tennessee Self Concept Test.
9. Collect the tests and make introductory task explanation: "Everybody has got his own ideas about what counseling is, talk about what you think counseling is." (During this pre-test period, there should be minimal counselor interaction. He should maintain as neutral a posture as possible. Begin by requesting that the clients introduce themselves.)

    Concluding statement: At the conclusion of the period and at least 60 minutes later, the counselor terminates the session. "Our time is up, our next session is __________. Before you leave today, we would like you to listen to a brief statement on tape recorder, and talk into it."
10. Individual administration of the "Expanded Perception" test.

Post testing - Session 16 - Includes Items 6 - 10.

CHANGE DURING AND WITHIN COUNSELING: Enrollee verbal behaviors were observed during three 20 minute time segments within each session and across progressive sessions for quantity of Desired Behavior, "Other" statements and member-to-member responding of positive, negative and neutral valance. All counseling sessions were tape recorded. One half of each two hour recorded session was monitored and scored by five graduate students who were trained with an established reliability. The tape recordings were scored in terms of 1) the frequency of occurences of six different aspects of counselor input, and 2) five different types of group member response.

CHANGE ASSOCIATED WITH COUNSELING: Enrollees from the total NYC program were observed for a period of time equal to, but prior to, counseling and then compared with the behaviors observed during the counseling period. The data were obtained from NYC payroll records, monthly reports, and from juvenile court records. The behaviors were: terminations and

②

reason, job and school absences, number of enrollees expressing interest and entering educational or supportive skill programs, and the number of enrollees arrested by the police or referred to juvenile court.

STATISTICAL METHODOLOGY

The level of significance established for statistical rejection of the Null Hypothesis or acceptance of chance probability was set at the .25 level. While this was a departure from the more traditional .01 and .05 levels of significance, the wider confidence limits seemed more appropriate because of the exploratory nature of the research. There is a paucity of research in this area with few definitive leads to pursue. The risks of identifying differences due to chance seem less than the risk of remaining dysfunctional by ignoring real differences and considering them as chance. We felt the need to begin, and we were looking for some leads.

PRE AND POST TESTING: Data from all objective instruments were collected according to site and model. Each subject's scores were then punched into IBM cards, along with selected biographical data and attendance. Statistical analyses were run on the CDC 3400 computer. One way analysis of co-variance was run on all objective data for subjects who had completed pre and post testing. In all these cases, analysis was of the post test score, with pre test score as the co-variate. For instruments administered only once, such as the Teacher Rating Scale, and Work Supervisor Rating Scale, a one-way analysis of variance was used. Since subjects were randomly assigned to treatments, analysis of variance of post test scores seemed to be appropriate. However, it was decided to utilize analysis of co-variance as a control against any possible biasing of subject assignment through the influence of logistics, drop-outs, uncollectable data, etc. Comparison of the ANOVA and ANACOVA results demonstrated this was probably not a critical concern, since the obtained F ratios were very similar.

SESSION BY SESSION RATINGS: Raters were trained for two weeks on procedures for evaluation of tapes of the counseling sessions. Scales were developed to assist in this rating procedure which consisted of making frequency counts of thirteen different indices of counselor and group member behaviors (see Appendix 6).

Rater reliability was tested prior to the actual production of session data through intra class correlation for realibility ratings. Obtained coefficients ranged from .87 to .97, indicating an acceptable degree of intra rater agreement on each model.

The completed session ratings were then punched into IBM cards along with counselor and co-counselor ratings of the same session. Statistical analyses, including product-moment correlation and one-way analysis of variance, were than performed using the CDC 3400 computer.

BEHAVIORAL DATA: Behavioral data consisted of frequency counts of the various kinds of court referrals, school discipline referrals, school attendance, job attendance, and terminations for all subjects in the NYC programs at the two sites, and for all subjects by models. In most cases, these data were tabled and presented for inspection. Where sufficient 'n'. permitted, statistical tests were run using non-parametric analyses of Chi-square and median tests.

HILL DATA: The HIM has two dimensions. The first dimension concerns itself with what the group talks about. Four content areas are specified: topic, group, personal, and relationship. A topic response refers to talk of topics, e.g., current events which are external to the group, whereas talk of group itself. Personal talk is talk about the members themselves with a member assuming topic person status, and relationship talk is "here and now" talk of members' relationship with or reactions to each other.

The second dimension of the HIM is composed of five work categories: Responsive, Conventional, Assertive, Speculative, and Confrontive. Assertive is characterized by social protest and assertive or acting-out behavior on the part of the member. In the Speculative category, group members are said to play the "therapeutic game," and the use of speculative or exploratory behavior is evidenced. Whereas, on the Confrontive level, there is real involvement or impact, and members often take risks.

In the present study, the HIM-G was utilized as a means of ascertaining interaction in the various group models for progressive sessions 2, 6, 10, and 15. The 72-item HIM-G rating scale was rated by two judges trained and certified at the Youth Studies Center at Los Angeles. Twenty minute segments from all groups of sessions (2, 6, 10, 15) were rated. The segments consisted of the first, middle, and last twenty minutes of a two hour taped session. The scale took approximately twenty minutes to complete, and it was rated by the judge at the completion of listening to the session.

The data generated by an analysis of the Hill Interaction Matrix was subjected to trend analysis to ascertain if there were any differences in the degree and depth of interaction within the various models over time.

RELIABILITY OF PROJECT DEVISED QUESTIONNAIRES: To help meet the dearth of appropriate criterion instruments, several attitude questionnaires were developed by the project researchers. The reliability of these instruments were tested with fifteen original respondents who were randomly identified from the Albuquerque population and asked to respond a second time to each instrument. Test-retest reliability coefficients were calculated and are reported in Table 1.

TABLE 1

TEST-RETEST RELIABILITY COEFFICIENTS OF PROJECT DEVISED QUESTIONNAIRES (N=15)

Instrument	Test-retest Reliability Coefficient
Enrollee Attitude Questionnaire	.93 (all of 16 items) .78 (any one item)
Supervisor Attitude Questionnaire	.85 (sum of 8 items)
Teacher Attitude Questionnaire	.86 (sum of 10 items)

FACTOR ANALYSIS OF EXPANDED PERCEPTION TEST (EPT): It was considered vital to have some measure of the degree to which enrollees were able to increase their perceptions toward the areas of authority, work, and self- areas which were of crucial importance in terms of counseling goals. To establish construct validity, a principal components analysis of post test EPT responses in all areas was performed on the test. Verimax rotation was utilized on all values greater than unity, resulting in three factors which accounted for 79 per cent of the total variance. The variables which went into the factor analysis are presented in Table 2.

TABLE 2

EXPANDED PERCEPTION TEST CATEGORIES ENTERING INTO FACTOR ANALYSIS (POST TEST)

1.	Authority Words	Total frequency
2.	Authority Words	Positive frequency
3.	Authority Words	Negative frequency
4.	Authority Words	Verbs and adverbs frequency
5.	Authority Words	Nouns and adjectives frequency
6.	Authority Words	Neutral frequency
7.	Work Words	Total frequency
8.	Work Words	Postive frequency
9.	Work Words	Negative frequency
10.	Work Words	Verbs and adverbs frequency
11.	Work Words	Nouns and adjectives frequency
12.	Work Words	Neutral frequency
13.	Self Words	Total frequency
14.	Self Words	Positive frequency
15.	Self Words	Negative frequency
16.	Self Words	Verbs and adverbs frequency
17.	Self Words	Nouns and adjectives frequency
18.	Self Words	Neutral frequency

Authority words were given in response to three word clusters:

1. Social Worker-teacher-counselor
2. Policeman-probate officer-judge
3. Employer-boss-foreman

Work words were given in response to the three word clusters:

1. Job-duty-pay
2. Pay-salary-income
3. Ability-skill-talent

Self words were given in response to the three word clusters:

1. Body-phsique-appearance
2. Me--I--myself
3. Thoughts-ideas-fantasies

Table 3 presents factor loadings over .45 for the above variables. The factors are labeled according to the judgments of the researcher as to their makeup, and according to the percent of variance which they extracted.

TABLE 3

ROTATED FACTORS AND FACTOR LOADINGS, EXPANDED PERCEPTION TEST

Factor 1 - Activity (26.35%)	
.89	Verbs and adverbs (self)
.82	Verbs and adverbs (work)
.78	Negative (self)
.75	Negative (work)
.67	Positive (self)
.57	Total (self)
.55	Positive (work)
.54	Total (work)
.47	Verbs and adverbs (authority)
Factor 2 - Neutral (26.77%)	
.93	Neutral (work)
.93	Neutral (authority)
.89	Neutral (self)
.66	Nouns and adjectives (authority)
.65	Nouns and adjectives (self)
.64	Nouns and adjectives (work)
.57	Total (self)
.56	Total (work)
.50	Total (authority)
Factor 3 - Authority (26.74%)	
.84	Positive (authority)
.80	Total (authority)
.73	Positive (work)
.69	Nouns and adjectives (authority)
.67	Negative (authority)
.60	Verbs and adverbs (authority)
.58	Nouns and adjectives (work)
.57	Total (work)
.52	Positive (self)

These results make it apparent that counselees' responses tended to cluster in a somewhat consistent pattern, albeit not one that would have been suggested by the original trichotomy. Work and Self words tended to cluster on Factor 1, while Authority words had a clear tendency to be related to Factor 3. There also seems to be little differentiation between frequency of positive and negative words elicited; however, neutral words seem to cluster quite nicely.

Taken in toto, the present analysis may be interpreted as offering support for the Work-Self dimensions, the Authority dimension, neutral words, positive-negative words, and an active-passive dichotomy as exemplified by verbs-nouns, with spoken verbs indicating active tendency and spoken nouns indicating passive tendency. Comparisons between groups were then made, bearing these results in mind.

Finally, in order to get an estimate of the reliability of the EPT, an identical principal components analysis was done on the pre-test data. Three factors were extracted which were very similar to the preceding three in makeup, accounting for 75.6 per cent of the variance in the responses. These data were used as evidence for the reliability of the EPT, giving rise to a greater degree of confidence in the results obtained in comparisons of experimental groups.

SUMMARY

Enrollee characteristics were appraised by a review of the literature and visits with enrollees from selected programs. The characteristics have been described as including psychological problems of: coping with authority, lack of communication skill, a vascillation between pessimism and optimism, and a struggle between environmental Independence and Psychological Dependence. No one characteristic seems totally at fault, rather it is a quantity that persists. The characteristics exist in affluence as well, but are less overwhelming and usually one at a time.

Current counseling procedures have been described as moving toward definitive models for intervention. The intervention methods have derived from behavioral and existential psychology and developed into four basic procedures described as: task prescription, selective responding, modeling and "other-rapport" statements. The four procedures were then used as the common methods for the models.

The dimensions of five group counseling models were discussed as: Desired Behavior, Intermediate Behaviors, Focus and Counselor Methods. Each model encompassed a particular Desired Behavior which was assumed to have favorable effects upon enrollee social behavior outside of counseling and improve his employability.

The models were: Problem Identification, Intrapersonal, Interpersonal, Perceptual Modification and Relationship. The Counselor Methods were discussed as Task Prescriptions, Selective Responding and Modeling and examples were given of the various statements as they occurred from the counseling.

The goals for the study were recommendations for NYC Counseling and the defining of new variables for further research. The goals for counseling were: 1) evaluation of counseled enrollee behavior and behavior of enrollees from the total program, 2) descriptions of the various models in process, and 3) attitude and evaluations of the models by counselors. The expected outcomes for each model were: expanded perception, member-to-member responding, attitude and the generalizing of these outcomes to social (employability) behaviors external to counseling.

The research design was multiple treatment and control with pre and post testing. The populations were obtained from two NYC programs in two cities. Two sample clusters were formed for each city with five models and two control groups formed with eight (male and female) enrollees for each group selected on the basis of geographical location. The groups were then randomed to models and controls. Each counselor team, a professional and para-professional was assigned to a sample cluster and worked with each experimental group for two hour sessions twice weekly for a two month period.

The level of confidence for rejection of the Null Hypothesis was set at the .25 level. One way analysis of co-variance was used for all objective data with the pre test as the co-variate. Session by session scoring of verbal content during counseling was treated through correlation and analysis of variance. Behavioral data was tabled with nonparametric analysis. Trend analysis was used for the HIM-G.

PART III

RESEARCH FINDINGS

Potential changes in enrollee behavior was appraised in two ways. First, a testing period was established immediately prior to counseling and immediately following the last counseling session. Various tests and observations were used to gain the data and pre- and post comparisons were made for each indicator variables. Second, knowing how counseling often "spills over" to peers who are not directly effected and the potential for Hawthorne effect, overt behaviors were appraised for the total population. A period of two months prior to counseling and the two month period during counseling were compared. There were two purposes for this later analysis. We wanted to see whether an on-going group counseling program would be supportive to certain on-going behaviors not otherwise apparent, and also, whether the Hawthorne effect would be apparent with gains "spilling over" to the total program.

Enrollee change is reported in two parts: (1) Change that follows counseling, and (2) Change associated with counseling.

CHANGES THAT FOLLOW COUNSELING

(Pre- and Post Testing)

The data indicating changes following group counseling with the models were generated from two standardized questionnaires, five non-standardized scales, a tabulation of academic grade averages, and a scoring of member to member direct responding during the structured pre- and post interaction period. Changes in these data were observed for each model with comparison made between other models and control groups. The two cities are reported separately followed by discussion for each indicator variable. The variables are: IPAT anxiety-Tennessee self concept, attitude toward enrollee, enrollee attitude, expanded perception, and member to member direct responding.

IPAT ANXIETY AND TENNESSEE SELF CONCEPT

The standardized questionnaires were not especially revealing. Validity must be questioned because of the subjective estimates made concerning motivation and reading ability of some of the enrollees. With cautious interpretation, however, the data could be considered as potential indicators.

ALBUQUERQUE: Table 4 presents the results of the analyses of covariance for the five counseling models and the two control groups on the IPAT Anxiety Scale and the Tennessee Self Concept Scale for Albuquerque. Adjusted means and standard error of means, as well as F-ratios, are included in the table.

TABLE 4

ALBUQUERQUE
IPAT ANXIETY - TENNESSEE SELF CONCEPT

Analysis	ANACOVA IPAT Anx. Scale	ANACOVA TSC Sc. Score	ANACOVA TSC Total P Score	ANACOVA TSC Total V Score
Model				
Control I				
x (adjusted)	32.17	30.67	33.64	41.45
sd (sem)	2.22	1.33	.78	3.79
Control II				
x (adjusted)	33.03	31.38	31.52	36.19
sd (sem)	2.13	1.29	.76	3.59
Interpersonal				
x (adjusted)	33.14	32.61	31.97	45.38
sd (sem)	2.35	1.39	.81	3.84
Intrapersonal				
s (adjusted)	33.62	32.45	33.09	41.73
sd (sem)	2.20	1.33	.80	3.71
Perc. Mod'n.				
x (adjusted)	33.34	31.45	32.23	43.35
sd (sem)	2.21	1.32	.79	3.71
Problem I. D.				
x (adjusted)	35.80	30.16	33.14	36.65
sd (sem)	2.15	1.28	.76	3.59
Relationship				
x (adjusted)	31.05	33.06	33.14	51.82
sd (sem)	2.14	1.29	.77	3.60
F ratio	.46	.67	.99	2.19
Probability	n. s.	n. s.	n. s.	< .10

The V score of the Tennessee Self-Concept Scale was significant at the .10 level. It should be noted however that all of the treatment groups fall well within the standardized "normal" range as printed in the test manual. The total V score represents the amount of variability existent in the Questionnaire. High scores (those well above the norm 49.53) would indicate the person has little unity or integration of personality, but rather tends to departmentalize certain areas of self quite apart from the remainder of self. "Well-integrated people generally score below the mean." Problem Identification and non-treatment control groups scored lowest. The Relationship model did evidence a somewhat higher adjusted mean (51.82), but the standard error of the mean was within the acceptable range.

PHOENIX: A similar analysis of co-variance for the results of the IPAT Anxiety Scale and the Tennessee Self-Concept Scale were performed for the data from the Phoenix site. In order to compensate for absences, a separate analysis of the questionnaires was performed for all enrollees who attended nine or more counseling sessions. The results of this analysis are presented in Table 5.

TABLE 5

IPAT ANXIETY - TENNESSEE SELF CONCEPT

	All Counselees				9 or More Sessions			
Analysis	ANACOVA IPAT Anx.	ANACOVA TSC Sc. Score	ANACOVA TSC Tot. P. Sc.	ANACOVA TSC Tot. V. Sc.	ANACOVA IPAT Anx.	ANACOVA TSC Sc. Score	ANACOVA TSC Tot. P. Sc.	ANACOVA TSC Tot. V. Sc.
Model								
Control I								
s(adjusted)	32.96	35.89	31.72	31.54	32.99	35.42	31.74	27.63
sem	2.04	1.31	.75	3.99	1.83	1.43	.77	3.84
Control II								
x(adj.)	34.10	32.17	31.90	47.65	34.13	31.74	31.74	48.01
sem	2.30	1.47	.84	4.54	2.06	1.60	.86	4.33
Interpersonal								
x(adj.)	36.10	34.43	30.21	30.00	34.43	32.58	30.40	25.51
sem	1.97	1.26	.73	3.90	1.98	1.54	.83	4.16
Intrapersonal								
x(adj.)	36.43	31.26	30.80	50.68	36.43	30.91	30.83	37.20
sem	2.04	1.30	.75	4.11	1.98	1.54	.82	4.14
Perc. Mod'n.								
x(adj.)	34.72	29.10	32.95	43.49	32.59	29.50	33.59	39.79
sem	2.55	1.63	.93	5.00	2.58	2.02	1.08	5.45
Problem I. D.								
x(adj.)	35.83	32.66	31.80	45.03	40.12	32.05	30.72	46.12
sem	1.86	1.19	.68	3.63	2.17	1.71	.90	4.58
Relationship								
x(adj.)	36.82	32.15	31.82	45.12	36.35	31.63	31.66	42.62
sem	1.97	1.26	.72	3.91	1.83	1.43	.77	3.34
F ratio	.46	2.36	1.18	3.86	1.45	1.29	1.17	4.37
Probability	n. s.	$<.05$	n. s.	$<.01$	$<.25$	n. s.	n. s.	$<.01$
	df (6, 88)				df(6, 72)			

An examination of the results of the IPAT Anxiety Scale shows that when the data for those enrollees that attended less than nine sessions were excluded, significance was reached at the .25 level. The finding also shows that the Perceptual Modification and the Control Group I evidenced the least amount of anxiety. The Problem Identification Model evidenced an increase in anxiety.

The total V score of the Tennessee Self Concept Scale results were significant beyond the .01 level. The highest V scores were received by Control Group II followed by the Problem Identification counseling groups. The lowest scores were received by the Interpersonal Counseling groups and Control Group I. The analysis of co-variance using all Phoenix enrollee scores showed similar trends.

DISCUSSION: The results of the IPAT Anxiety Scale, on first inspection, suggested that there was no difference experienced by any of the seven groups. However, when the data from the Phoenix site excluded those enrollees who attended less than nine sessions, a pattern presents itself. This pattern would argue that some of the models generated measurable increase in general anxiety. This was particularly true for the Problem Identification model, and to some extent in the Intrapersonal and Relationship models. While this would, on the surface, appear to be an undesirable finding, closer examination would suggest this was, in fact, both desirable and explainable. The Problem Identification model places heavy emphasis upon a person in a group, not only identifying the source of anxiety or feeling that he might have, but then directly engaging in role-playing this particular person or incident which was emotionally provoking. To a lesser extent, Intrapersonal and Relationship models also demanded more expression of direct feeling to other people in the group. They are more, in this sense, internally oriented. A desirable and logical finding in this case would be that anxiety would be increased. To the extent that one's anxiety is increased, one might conclude that these people are becoming more motivated to act upon the environment in which they live. The scores remained within the "normal" range.

The results of the Tennessee Self Concept Scale are more difficult to interpret. The significant difference on the V score suggests that more variability and responses was evidence for the Intrapersonal model. Probably the safest conclusion that can be drawn from this finding is that these groups were in the process of changing their formulated view of themselves. Interestingly enough, this interpretation receives some support from the very low scores received by the Interpersonal model in which the enrollees focus almost exclusive attention upon environmental expectations of themselves. The control Group I, which did not have a great deal of interpersonal interaction, also received a low V score.

ATTITUDES TOWARD ENROLLEE

ALBUQUERQUE: The questionnaire completed by the teacher consisted of two parts. The first (Teacher #1) solicited judgments of the teacher on changes the enrollee manifested regarding attitude toward school work. This ranged from study habits to general enthusiasm for the school program. The second half of the questionnaire (Teacher #2) asked teachers to make judgments as to whether they saw the NYC group counseling project having impact upon the school work of the particular enrollee in question. Each questionnaire consisted of five items and had a Likert-type scale, running from one to five, with one being a negative evaluation and five being the highest positive evaluation. The five items were summed and analyzed separately. The teachers were also asked to report academic grades earned by the enrollees in their particular class prior to counseling. They were also asked to estimate the grades the enrollees would receive at the next grading period, which would be after the counseling treatment.

The work supervisors of the enrollees also completed a questionnaire before and following the group counseling. The questionnaire consisted of four questions regarding enrollees' attitude toward the NYC program and the people involved in it, and four questions regarding the enrollees' work behavior and relationship with NYC participants. All data from this questionnaire were summed with the high scores indicating a negative evaluation, low scores indicating a positive evaluation.

Results of the questionnaire evaluations of the teachers and work supervisors are presented in Table 6.

TABLE 6

ALBUQUERQUE

TEACHER AND WORK - SUPERVISOR QUESTIONNAIRES

Analysis	ANOVA teacher #1*	ANOVA teacher #2*	ANOVA grade pre*	ANOVA grade post*	ANOVA total of 8 supervis'r Q. **
Model					
Control I					
x	3.54	3.48	1.72	2.00	13.78
sd	.47	.44	.78	.82	6.57
Control II					
x	3.52	3.38	1.78	2.20	12.57
sd	.41	.36	.83	1.03	4.61
Interpersonal					
x	3.14	3.06	2.12	2.00	15.00
sd	.30	.40	1.13	.76	6.26
Intrapersonal					
x	3.60	3.53	2.20	2.40	19.33
sd	.44	.43	.79	.97	9.69
Perc. Mod'n.					
x	3.27	3.38	2.12	1.89	13.87
sd	.24	.30	.99	.78	5.51
Problem I. D.					
x	3.68	3.33	1.92	2.17	12.30
sd	.37	.50	.67	.72	4.03
Relationship					
x	3.35	3.21	1.55	1.80	11.60
sd	.33	.32	.53	.63	5.15
F ratio	2.54	1.52	.80	.61	1.56
Probability	< .05	< .25	n. s.	n. s.	< .25

* The higher the mean rating (or grade number) the more favorable the evaluation.

**The lower the mean rating the more favorable the evaluation.

Inspection of teacher ratings of attitude changes (Teacher #1) reveals that the enrollees in the Intrapersonal and Problem Identification models were rated more favorably than either control group. This difference reached the .05 level of confidence.

Results of questionnaire (Teacher #2) show the Intrapersonal model more favorable than controls, but shows a reverse trend for the Problem Identification model.

Results of the analysis of variance of grades received prior to the group counseling, and following group counseling, remain inconclusive. One may note, however, that the grades received by the enrollees following counseling increased for all groups except the Interpersonal and Perceptual Modification model. These two model groups also received the lowest teaching ratings. Inasmuch as the post counseling grades were estimations, it could be theorized that the teachers' attitudes toward the enrollees affected the grades they expected to give them.

An inspection of the mean ratings given by work supervisors suggests that the Interpersonal and Intrapersonal received a somewhat more negative evaluation than the other three models. (The higher the mean rating, the more negative the evaluation). The Relationship model was most favorable and Problem Identification also positive.

PHOENIX: A form of the same questionnaire was given to the work superviosrs of the Phoenix enrollees. Results of the supervisor's questionnaire are presented in Table 7.

TABLE 7

PHOENIX
WORK-SUPERVISOR QUESTIONNAIRE

Analysis	ANOVA Supervisor Questionnaire Total of 8 Responses
Model	
Control I	
x	16.43
sd	8.20
Control II	
x	18.00
sd	8.85
Interpersonal	
x	10.50
sd	2.82
Intrapersonal	
x	12.11
sd	4.88
Perc. Mod'n.	
x	17.20
sd	6.42
Problem I. D.	
x	13.09
sd	5.46
Relationship	
x	14.00
sd	6.18
F ratio	1.51
Probability	$< .25$
df (6, 52)	

Note: The lower the mean, the better the rating.

An inspection of Table 7 suggests that with only one exception, enrollees who were in counseling treatment were regarded more positively by their work supervisors. The Interpersonal and Intrapersonal counseling models received the most positive ratings, while the non-treatment Control Group II and the Perceptual Modification model received the least favorable supervisor ratings.

DISCUSSION

Attitudes toward enrolles held by teachers and work supervisors were more favorable following counseling. It was less clear however, which model appeared as most effective in this regard. For teachers rating of enrollee attitude toward school, Intrapersonal emerged more favorable. For work supervisors, it was Relationship in Albuquerque and Interpersonal for Phoenix.

ENROLLEE ATTITUDES

The Enrollee Attitude Questionnaire consisted of sixteen items describing various phases of the NYC program and general attitudes toward work and authority. A Likert-type scale, ranging from one to five, served as the rating scale, with a rating of one indicating a dislike and a rating of five indicating the highest positive.

ALBUQUERQUE: The analysis of co-variance of the 16 item attitude questionnaire results, along with adjusted means and standard errors, for the Albuquerque site is presented in Table 8.

TABLE 8

ALBUQUERQUE BY MODEL
ENROLLEE ATTITUDE QUESTIONNAIRE (EAQ)

	CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PER'L MODIF'N.	PROBLEM I. D.	RELA-TION'P.
EAQ #1 'NYC Program'							
x (adj.)	4.62	4.41	4.47	4.39	4.73	4.48	4.44
sem	.14	.14	.15	.14	.14	.14	.14
f ratio	.79						
prob.	n. s.						
EAQ #2 'Job Supervisor'							
x	4.28	4.15	4.33	3.85	4.22	4.53	3.93
sem	.22	.21	.23	.22	.22	.21	.21
f ratio	1.14						
prob.	n. s.						
EAQ #3 'NYC Coordinator'							
x	4.31	4.13	4.52	4.48	4.30	4.36	4.33
sem	.16	.15	.16	.15	.15	.15	.15
f ratio	.71						
prob.	n. s.						
EAQ #4 ' Job I Am Doing'							
x	4.26	3.77	3.98	4.00	4.20	4.10	4.27
sem	.21	.20	.22	.21	.21	.20	.20
f ratio	.76						
prob.	n. s.						
EAQ #5 'What I Am Learning'							
x	3.73	3.64	3.85	4.06	4.35	4.10	4.24
sem	.27	.26	.27	.27	.27	.25	.26
f ratio	1.01						
prob.	n. s.						

TABLE 8
(cont.)

	CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'N.	PER'L MODIF'N.	PROBLEM I.D.	RELATION'P.
EAQ #6 'People I Work With'							
x	4.44	4.14	4.49	4.60	4.32	4.34	4.36
sem	.17	.17	.18	.17	.17	.16	.17
f ratio	.71						
prob.	n. s.						
EAQ #7 'People In NYC'							
x	4.49	4.22	4.57	4.45	4.47	4.72	4.55
sem	.14	.14	.15	.14	.14	.14	.14
f ratio	1.16						
prob.	n. s.						
EAQ #8 'Other Kids In NYC'							
x	4.28	4.04	4.16	4.28	4.19	4.47	4.45
sem	.16	.15	.16	.16	.16	.15	.15
f ratio	1.04						
prob.	n. s.						
EAQ #9 'Way NYC Cares About Me As A Person'							
x	4.49	4.17	4.56	4.31	4.20	4.40	4.56
sem	.18	.17	.18	.18	.18	.17	.17
f ratio	.84						
prob.	n. s.						
EAQ #10 'Way NYC Helps Me Get Jobs'							
x	4.47	4.10	4.58	4.59	4.60	4.44	4.88
sem	.18	.17	.18	.17	.18	.17	.17
f ratio	1.83						
prob.	< .10						

TABLE 8
(cont.)

	CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PERC'L. MOD'N.	PROBLEM IDEN'N.	RELA-TION'P
EAQ #11 'Way NYC Helps Me Learn To Talk To Others'							
x	4.29	4.28	4.03	4.18	4.19	4.34	4.28
sem	.17	.18	.19	.19	.19	.18	.18
f ratio	.31						
prob.	n. s.						
EAQ #12 'The Law And Rules'							
x	3.57	3.68	3.78	3.98	3.83	3.89	3.81
sem	.19	.17	.19	.18	.18	.18	.18
f ratio	.53						
prob.	n. s.						
EAQ #13 'To Work Hard And Get Ahead'							
x	4.41	4.22	4.43	4.22	4.46	4.50	4.32
sem	.16	.15	.16	.16	.16	.15	.15
f ratio	.52						
prob.	n. s.						
EAQ #14 'School Work'							
x	3.72	3.65	3.37	3.57	3.53	3.80	3.27
sem	.24	.23	.24	.23	.23	.23	.23
f ratio	.64						
prob.	n. s.						
EAQ #15 'The Way Others Listen'							
x	3.93	3.87	3.86	3.38	3.48	3.91	3.71
sem	.21	.20	.21	.21	.21	.20	.20
f ratio	1.13						
prob.	n. s.						
EAQ #16 'Talking To Other People'							
x	4.25	4.14	4.00	4.25	4.32	4.17	4.10
sem	.19	.18	.19	.19	.19	.18	.18
f ratio	.30						
prob.	n. s.						

An examination of Table 8 shows that only one item (#10) reached significance. The statement was: "The way the NCY program helps me to get a job." On this item, all of the counseling models reached a mean higher than the controls. The Relationship model was considerably higher than all groups.

Phoenix: Results of the co-variance for the enrollee attitude questionnaire for Phoenix are presented in Table 9 together with the adjusted means, standard error of means, and F ratios.

TABLE 9

PHOENIX BY MODEL
ENROLLEE ATTITUDE QUESTIONNAIRE (EAQ)

		CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PER'L MODIF'N.	PROBLEM I.D.	RELATION'P.
The NYC Program	EAQ #1							
	x	3.84	3.85	4.27	4.65	4.66	4.28	4.26
	sd	.16	.19	.16	.17	.21	.15	.16
	f ratio	3.40						
	prob.	< .01						
The Job Supervisor	EAQ #2							
	x	3.96	3.35	4.22	4.92	4.09	4.21	4.19
	sd	.22	.25	.21	.22	.28	.20	.22
	f ratio	3.78						
	prob.	< .01						
The NYC Coordinator	EAQ #3							
	x	4.04	3.47	4.29	4.45	4.54	4.01	4.19
	sd	.24	.27	.23	.24	.30	.21	.23
	f ratio	1.81						
	prob.	< .25						
The Job I Am Doing	EAQ #4							
	x	4.47	4.05	3.94	4.84	5.01	4.57	4.27
	sd	.20	.23	.20	.20	.25	.19	.20
	f ratio	3.21						
	prob.	< .01						
What I Am Learning	EAQ #5							
	x	4.41	4.39	3.88	4.46	5.05	4.16	4.07
	sd	.20	.23	.20	.20	.25	.19	.20
	f ratio	2.67						
	prob.	< .05						

TABLE 9
(cont.)

		CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PERC'L MODIF'N.	PROBLEM IDEN'N.	RELA-TION'P.
The People I Work With	EAQ #6							
	x	4.54	3.74	4.31	4.48	4.77	4.30	3.99
	sd	.23	.26	.22	.23	.29	.21	.22
	f ratio	1.86						
	prob.	< .10						
The People In The NYC	EAQ #7							
	x	4.31	3.95	4.26	4.27	4.28	4.14	3.83
	sd	.22	.25	.21	.23	.28	.20	.21
	f ratio	.71						
	prob.	n. s.						
The Other Kids In The NYC	EAQ #8							
	x	4.04	4.06	4.45	4.03	4.59	4.04	3.78
	sd	.23	.25	.22	.22	.29	.20	.22
	f ratio	1.30						
	prob.	n. s.						
The Way NYC Cares About Me As A Person	EAQ #9							
	x	4.08	3.56	4.47	4.44	4.57	4.05	3.70
	sd	.24	.27	.23	.23	.30	.21	.23
	f ratio	2.33						
	prob.	< .05						
The Way NYC Program Helps Me Get Jobs	EAQ #10							
	x	4.41	3.81	4.40	4.61	4.73	4.32	3.87
	sd	.23	.26	.22	.23	.28	.20	.22
	f ratio	2.33						
	prob.	< .05						

TABLE 9
(cont.)

		CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PERC'L MODIF'N.	PROBLEM IDEN'N.	RELA-TION'P.
Working In NYC Helps Me Learn To Talk To Other People Better	EAQ #11							
	x	4.13	4.24	4.26	4.31	4.67	4.04	3.88
	sd	.23	.26	.22	.23	.28	.20	.22
	f ratio	.95						
	prob.	n.s.						
The Law & Rules	EAQ #12							
	x	4.16	3.32	4.00	4.10	4.71	3.68	3.60
	sd	.24	.28	.24	.25	.31	.22	.24
	f ratio	2.48						
	prob.	< .05						
To Work Hard & Get Ahead	EAQ #13							
	x	4.21	3.82	4.27	4.71	4.78	4.64	3.86
	sd	.23	.25	.22	.22	.28	.20	.22
	f ratio	2.84						
	prob.	< .05						
School Work	EAQ #14							
	x	3.52	3.53	3.46	3.84	3.99	4.06	3.41
	sd	.25	.27	.23	.24	.30	.22	.24
	f ratio	1.22						
	prob.	n.s.						
The Way Other People Listen	EAQ #15							
	x	3.88	2.86	3.73	3.77	3.96	3.81	3.65
	sd	.25	.28	.24	.25	.31	.22	.24
	f ratio	1.77						
	prob.	< .25						
Talking To Other People	EAQ #16							
	x	4.22	4.00	3.80	4.22	4.32	4.00	3.98
	sd	.22	.25	.21	.22	.27	.20	.21
	f ratio	.62						
	prob.	n.s.						

An examination of Table 9 reveals some clear indications of counseling gains for enrollee attitude toward the NYC program in general. Eleven of the sixteen questions from the questionnaire were found to be significant at the .25 level or less, with seven of the significant differences having probability beyond the .05 level. In nearly all of the significant differences identified, one can readily observe that the non-treatment control group (Control Group II) was very nearly the lowest, if not the lowest, on all analyses in terms of adjusted means. With the exception of one of the counseling models, the treatment control group (Control Group I) also tended to be low.

These findings give very clear support to the hypotheses that the model group counseling did indeed effect the attitude of NYC enrollees. The one counseling model which did not compare as favorably with either of the control groups, or the other four counseling groups, was the Relationship model. These adjusted means appear to be clearly lower than the other groups. The two counseling models which tended to have the highest adjusted means of all of the eleven significant analyses were the Intrapersonal and Perceptual Modification models. While the differences between these two are slight, the Perceptual Modification model did appear to provide the best counseling experience with regard to changing attitudes more positively to the questionnaire's concepts.

An examination of the questions upon which significant adjusted mean differences were found reveals some interesting relationships. There was an apparent relationship between the question evidencing change and the general area of the NYC program and self, i.e., the NYC program, my job supervisor, job I am doing, etc. To a lesser extent, the attitudes changed more favorably on questions related to the job the enrollee was doing, the people with whom he was working and the general concepts of law, rules and hard work.

Discussion: Probably the safest conclusions to draw from an examination of the EAQ is that something on the order of the "Hawthorne" effect was present. All means were above the three ratings, (mid point on the scale), thus indicating a more positive evaluation on all 16 items. The non-treatment control group (Control Group II) tended to be lower than all other groups with regard to questions of attitude toward the NYC program. This suggests that, inasmuch as the members of that particular group did not get as much attention, they did not evaluate the concepts as highly as did Control Group I (treatment control) and the other five counseling model groups. It is also interesting to note that the ratings regarding general attitudes toward authority, work and people nonspecific to the NYC program tended to get lower ratings. This was particularly true with regard to item 12 "The Law and Rules", item 14 "School Work", and item 15 "The Way Other People Listen." These findings suggest the overall research project did have a positive effect in terms of attitude evaluation with regard to the specific NYC program, but did not appreciably affect concepts not specifically related to the NYC program.

The obvious conflicting results that existed between the Albuquerque and Phoenix counseling clients suggest one of two possible explanations. The first possible explanation argues that the Albuquerque counseling group, which was exclusively composed of enrollees who were attending school, did not change their attitudes toward the NYC program as much by counseling because treatment effects were "washed out" by their school attendance. The on-going experience in school had more impact than the counseling.

While this is a very safe, and perhaps overly cautious, explanation of the differing sites' results, a second explanation appears more promising. This explanation argues that intensive counseling for enrollees who are not involved in any other socializing experience (school) develops a greater positive impact on attitude toward the sponsoring organization, which in this case would be the Neighboorhood Youth Corps program. The Phoenix enrollees had only the NYC work program and the group counseling treatment as sources of institutional influence. Under these circumstances, it seems plausible that the Phoenix enrollees would be led to alter their attitudes positively toward the NYC program and its inherent values more than their school attending Albuquerque counterparts. This is further supported when one notes that a portion of the Phoenix non-treatment control were in full time MDTA training during the total treatment period.

It is unclear why the results of supervisor work ratings do not coincide with the Enrollee Attitude Questionnaires. The enrollees in the Perceptual Modification model received nearly the lowest ratings by their supervisors, and yet were rather consistently among the highest in terms of the enrollee's attitudes toward his job supervisor, and the NYC program in general. The enrollees in the Interpersonal counseling model, while receiving a rather high rating from the work supervisors, did not particularly reflect this level of positive attitude on their attitude questionnaire.

EXPANDED PERCEPTION

The third indicator of enrollee changes was gained through use of the Expanded Perception Test. This instrument was designed to utilize response words emitted from the enrollee in the presence of selected stimuli words. Three major areas thought to be of critical concern to NYC enrollees are: authority, work, and self. In order to assess the expanded perceptions of these three major concepts, the enrollees were presented three word clusters of three words each which pertained to the three major concepts.

Each enrollee was presented a word cluster and then asked to say all the words that came to mind related to the word cluster. A word count was made of all words mentioned during one minute of response to each word cluster. This was done for each of the three word clusters and for each of the three major concepts. Frequency counts were then tallied for the total number of words mentioned for all nine clusters (three word clusters X three concept areas), as well as each separate concept area. Additional analyses were made of all words with regard to quality of words mentioned. These categories consisted of the number of positive words, negative words, neutral words, total words, number of verbs plus adverbs, and number of adjectives plus nouns.

Albuquerque: An analysis of co-variance was performed on total words emitted, and also for each major concept. The results of the analyses of total words appear in Table 10 together with adjusted means, standard error of means, and F ratios.

TABLE 10

ALBUQUERQUE

EXPANDED PERCEPTION TEST (EPT), TOTAL WORDS

Analysis	ANCOVA Total of Tot. Words (EPT)	ANACOVA Total of Pos. Words (EPT)	ANACOVA Total of Neg. Words (EPT)	ANACOVA Total of Nut. Words (EPT)	ANACOVA Total of Verbs (EPT)	ANACOVA Total of Nouns (EPT)
Control I						
x (adjusted)	80.74	56.07	10.54	13.57	15.73	66.09
sd (sem)	11.43	8.04	2.25	7.71	3.98	9.55
Control II						
x (adjusted)	59.94	45.30	9.99	10.24	11.98	48.38
sd (sem)	8.92	6.27	1.75	6.11	3.13	7.42
Interpersonal						
x (adjusted)	83.20	46.47	11.51	22.61	11.58	71.30
sd (sem)	9.65	6.83	1.18	6.60	3.38	8.09
Intrapersonal						
x (adjusted)	66.31	41.11	10.03	15.75	8.21	56.63
sd (sem)	9.26	6.51	1.84	6.30	3.23	7.77
Perc. Mod'n.						
x (adjusted)	81.47	61.57	8.43	12.19	16.98	67.30
sd (sem)	10.85	7.62	2.12	7.40	3.79	9.05
Problem I. D.						
x (adjusted)	85.46	60.27	13.92	10.33	15.11	69.65
sd (sem)	8.94	6.28	1.77	6.11	3.13	7.47
Relationship						
x (adjusted)	67.66	48.65	8.17	10.89	6.07	61.46
sd (sem)	8.92	6.27	1.76	6.09	3.12	7.45
F ratio	1.19	1.38	.114	.47	1.42	1.13
Probability	n. s.	$<.25$	n. s.	n. s.	$<.25$	n. s.

Inspection of Table 10 reveals two significant areas of difference on the overall F ratios. Differences were found on the total number of positive words and on the total number of verbs. An examination of the frequency count of the total number of positive words and verbs does suggest a pattern relationship to total number of words given for all word cluster areas.

The Problem Identification model, the Perceptual Modification model, and the Control Group I appear to be consistently the highest in the three areas of: total words, positive words, and verbs and adverbs. On total number of words, the non-treatment control group (Control Group II) was the lowest. On the total number of negative words the Problem Identification adjusted mean was the highest, and the Perceptual Modification and Relationship models were the lowest, followed by the Control Group II.

For the total number of neutral words the models were more similar, with the exception of the higher Intrapersonal and Interpersonal adjusted means. Interpersonal appears considerably higher than any other, and Intrapersonal and Relationship appear considerably lower for total number of verbs. For total words and total nouns all groups were higher than the non-treatment controls.

An additional analysis was made for frequency count as pertaining to the three major concepts of authority, work, and self. Results of the analysis of co-variance for the frequency mean count of responses to authority are presented in Table 11.

TABLE 11

ALBUQUERQUE

EXPANDED PERCEPTION TEST (EPT) AUTHORITY WORDS

Analysis	ANACOVA EPT - Auth. Total Words	ANACOVA EPT - Auth. Pos. Words	ANACOVA EPT - Auth. Neg. Words	ANACOVA EPT - Auth. Neut. Words	ANACOVA EPT - Auth. Verbs	ANACOVA EPT - Auth. Nouns
Control I						
x	32.30	18.39	6.42	6.95	5.59	26.95
sd	4.02	2.65	1.05	2.68	1.56	3.27
Control II						
x	21.68	13.24	5.87	3.18	3.66	17.98
sd	3.76	2.49	1.00	2.58	1.49	3.06
Interpersonal						
x	27.83	12.65	5.16	10.97	3.89	23.39
sd	4.11	2.77	1.08	2.76	1.60	3.37
Intrapersonal						
x	22.41	9.96	5.72	7.83	2.16	20.52
sd	3.86	2.56	1.04	2.70	1.54	3.17
Perc. Mod'n						
x	30.42	21.12	5.42	3.41	5.14	25.61
sd	3.97	2.60	1.05	2.70	1.55	3.24
Problem I. D.						
x	28.02	18.72	7.27	2.69	5.47	22.43
sd	3.77	2.47	1.02	2.62	1.49	3.09
Relationship						
x	25.14	15.72	5.68	4.27	1.87	23.10
sd	3.75	2.47	1.01	2.60	1.48	3.07
F ratio	1.02	2.18	.48	1.30	1.00	.89
Probability	n. s.	$< .05$	n. s.	n. s.*	n. s.	n. s.

*Approaches sig. at $p < .25$ F (6, 99)   .25 = 1.34

The frequency words associated to authority concepts show that the Perceptual Modification, Problem Identification, Interpersonal models and Control Group I adjusted means are higher than the others, with Intrapersonal and the non-treatment control group (Control Group II) being considerably lower.

Significant differences were found within the adjusted mean ratings on positive words associated to authority concepts. The Perceptual Modification model was considerably higher than all other models with Problem Identification and Control Group I also being higher than the others. Much lower than any of the other models on this rating was the Intrapersonal adjusted mean. The adjusted mean number of words that were judged to be negative with respect to authority concepts showed that Problem Identification and the Control Group I had the highest frequency. The Perceptual Modification model adjusted mean was much lower when contrasted with its positive number of words associated with authority, suggesting that this particular treatment model was highly effective in shaping positive attitudes toward authority concepts. The Interpersonal model adjusted mean was considerably higher than any of the others on the number of neutral words associated with authority concepts, with the Problem Identification model, Control Group II, and Perceptual Modification model being considerably lower than any of the other groups.

The frequency of number of verbs associated to authority shows that the Perceptual Modification, Problem Identification, Control Group I means were considerably higher than were the other groups, with the Relationship and Intrapersonal models being the lowest. The Control Group I and Perceptual Modification models were highest with regard to frequency of nouns and Control Group II considerably lower.

The frequency of words associated to work concept stimuli words are presented in Table 12.

TABLE 12

ALBUQUERQUE

EXPANDED PERCEPTION TEST (EPT) WORK WORDS

Anlysis	ANACOVA EPT - Work Total Words	ANACOVA EPT - Work Pos. Words	ANACOVA EPT - Work Neg. Words	ANACOVA EPT - Work Neut. Words	ANACOVA EPT - Work Verbs	ANACOVA EPT - Work Nouns
Control I						
x	23.50	18.49	2.10	2.95	3.70	19.41
sd	3.74	2.92	.73	2.16	1.35	3.12
Control II						
x	17.15	15.32	1.16	1.09	5.34	11.91
sd	3.57	2.79	.70	2.09	1.30	2.97
Interpersonal						
x	26.56	18.77	1.50	6.10	4.53	23.56
sd	3.83	3.00	.74	2.32	1.40	3.22
Intrapersonal						
x	18.31	13.94	0.99	3.63	3.50	14.96
sd	3.65	2.87	.71	2.16	1.34	3.04
Perc. Mod'n.						
x	27.32	21.63	1.52	4.11	5.78	22.23
sd	3.73	2.91	.72	2.18	1.35	3.11
Problem I.D.						
x	27.41	19.17	3.38	5.38	3.95	22.88
sd	3.55	2.78	.70	2.09	1.30	2.95
Relationship						
x	21.27	17.46	1.60	2.85	1.94	19.65
sd	3.54	2.79	.69	2.09	1.30	2.95
F ratio	1.42	.80	1.33	.60	.94	2.11
Probability	< .25	n. s.	n. s.*	n. s.	n. s.	< .10

*Approaches sign. at p < .25 F (6, 99) .25 = 1.34

The results of the analysis of total words associated to work show that the Perceptual Modification, Problem Identification, and the Interpersonal adjusted means were higher than any of the other group models, with the non-treatment control group being the lowest. The overall F ratio for this particular analysis was significant at the .25 level. Frequency of number of positive words shows that as with authority concepts, the Perceptual Modification model is superior with regard to shaping positive attitudes. The Intrapersonal model was shown to be the least effective in shaping positive words associated with work concepts, as well as negative words. The Problem Identification model showed the highest frequency of negative words associated with work, and was next to highest with regard to number of neutral words. Control Group II and Perceptual Modification were considerably higher than the other groups in the area of number of verbs associated with work, and the Relationship model was lowest. The F ratio for the analysis of co-variance of number of nouns was significant at the .10 level. Perceptual Modification, Problem Identification, and Interpersonal models all were considerably higher on the number of nouns associated with the work concepts, with Control Group II being much lower than any of the other models.

The results of the analysis of co-variance for the frequency count of words associated to Self- concepts are reported in Table 13.

TABLE 13

ALBUQUERQUE
EXPANDED PERCEPTION TEST (EPT) SELF WORDS

Analysis	ANACOVA EPT - Self Total Words	ANACOVA EPT - Self Pos. Words	ANACOVA EPT - Self Neg. Words	ANACOVA EPT - Self Neut. Words	ANACOVA EPT - Self Verbs	ANACOVA EPT - Self Nouns
Control I						
x	29.62	21.98	2.03	5.12	5.46	24.63
sd	3.89	3.22	1.16	1.88	1.52	3.68
Control II						
x	18.07	13.50	2.07	2.81	1.45	13.91
sd	3.66	3.06	1.13	1.80	1.46	3.45
Interpersonal						
x	26.33	14.91	5.26	6.25	3.96	23.87
sd	3.99	3.34	1.17	1.94	1.58	3.74
Intrapersonal						
x	20.00	13.12	2.10	3.00	1.89	14.95
sd	3.79	3.20	1.14	1.87	1.51	3.57
Perc. Mod'n.						
x	27.06	21.42	2.47	4.02	5.91	21.19
sd	3.85	3.23	1.14	1.88	1.52	3.65
Problem I. D.						
x	28.67	22.58	3.61	2.97	5.23	23.83
sd	3.68	3.10	1.10	1.80	1.46	3.51
Relationship						
x	19.32	13.64	1.77	3.54	0.79	17.33
sd	3.69	3.09	1.10	1.80	1.46	3.49
F ratio	1.68	1.99	1.19	.47	1.98	1.64
Probability	$<.25$	$<.10$	n. s.	n. s.	$<.10$	$<.25$

The examination of frequency of words given to self concept reveals similar findings to authority and work concepts. Control Group I, Perceptual Modification, and Problem Identification groups were particularly high, with the lowest again being the non-treatment control group.

Some rather distinct differences are found upon examination of the number of positive words associated with the self concept. The Problem Identification, Perceptual Modification, and Control Group I all evidenced considerably higher adjusted means of positive words. The adjusted means of the Relationship, Intrapersonal, and Interpersonal models, and the Control Group II were quite low.

On frequency of negative words associated to self, the analysis shows that the Interpersonal is considerably higher than any of the other models, and the Relationship model is the lowest. On neutral words the Interpersonal model has again the highest adjusted mean, with the Perceptual Modification model, Problem Identification model, and the Control Group I adjusted means considerably higher than the other four models. The Relationship and Intrapersonal models, and Control Group II were quite low.

Regarding the number of nouns associated to self concepts, the Problem Identification, Perceptual Modification, and Interpersonal models, and the Control Group I adjusted means were quite high, particularly when contrasted with the lower adjusted means of Intrapersonal model and Control Group II.

Phoenix: An analysis of co-variance was performed on total words emitted to each major concept word cluster, as well as to each major concept for the Phoenix enrollees. The results of the analyses appear in Table 14 together with the adjusted means, standard error of means, and F ratios.

PHOENIX
EXPANDED PERCEPTION TEST (EPT) TOTAL WORDS

Analysis	ANACOVA Tot. of Tot. Words - EPT	ANACOVA Tot. of Pos. Words - EPT	ANACOVA Tot. of Neg. Words - EPT	ANACOVA Tot. of Neut. Words - EPT	ANACOVA Tot. of Verbs - EPT	ANACOVA Tot. of Nouns - EPT
Control I						
x (adjusted)	73.43	50.30	10.19	14.22	23.54	49.54
sd(sem)	15.34	8.84	5.45	4.14	7.91	9.85
Control II						
x	64.52	42.42	9.29	12.20	20.25	43.35
sd	19.56	11.25	7.02	5.35	10.03	12.70
Interpersonal						
x	41.40	21.62	8.43	6.92	10.09	32.79
sd	13.78	7.99	4.93	3.85	7.05	9.02
Intrapersonal						
x	76.51	51.04	20.77	12.29	32.01	48.81
sd	14.42	8.28	5.25	3.98	7.34	9.39
Perc. Mod'n.						
x	39.84	26.08	7.07	10.05	6.03	33.93
sd	15.23	8.74	5.42	4.20	7.71	9.90
Problem I.D.						
x	57.56	36.56	7.23	13.71	14.70	42.28
sd	12.74	7.34	4.56	3.52	6.47	8.31
Relationship						
x	60.99	43.26	10.09	6.84	19.23	41.54
sd	18.02	10.37	6.47	4.95	9.15	11.75
F ratio	.94	1.75	.82	.54	1.35	.47
Probability df (6, 62)	n.s.	$< .25$	n.s.	n.s.	$< .25$	n.s.

An inspection of Table 14 reveals a pattern of significant F ratios for the Phoenix site similar to those in Albuquerque. The .25 level of significance was again reached on total number of positive words and total number of verbs. The EPT results for the Phoenix site enrollees showed rather clearly that the Control Group I and the Intrapersonal model has considerably higher adjusted means than did the other five groups. The enrollees in Interpersonal and the Perceptual Modification appeared to produce the lowest number of words emitted to the various association clusters as evidenced by their low asjusted means.

A similar analysis of co-variance was performed of the six classifications of words associated to Authority concepts. Results of this analyses are presented in Table 15.

TABLE 15

PHOENIX

EXPANDED PERCEPTION TEST (EPT) AUTHORITY WORDS

Analysis	ANACOVA EPT - Tot. Auth. Words	ANACOVA EPT - Auth. Pos. Words	ANACOVA EPT - Auth. Neg. Words	ANACOVA EPT - Auth. Neut. Words	ANACOVA EPT - Verbs Adverbs Authority	ANACOVA EPT - Nouns Adjectives Authority
Control I						
x (adjusted)	25.44	13.29	6.33	4.93	7.15	17.36
sd (sem)	5.36	3.04	2.58	1.52	2.71	3.52
Control II						
x	24.63	13.99	5.89	3.22	6.99	17.33
sd	6.65	3.78	3.29	1.96	3.36	4.50
Interpersonal						
x	14.98	6.75	4.76	2.76	3.99	11.60
sd	4.62	2.64	2.33	1.38	2.31	3.14
Intrapersonal						
x	21.57	10.73	7.87	4.56	7.69	14.94
sd	4.23	2.41	2.10	1.25	2.13	2.89
Perc. Mod'n.						
x	7.30	3.42	5.00	2.83	.00	7.91
sd	6.05	3.35	2.81	1.78	2.87	4.11
Problem I. D.						
x	15.60	8.06	3.44	5.08	2.86	12.91
sd	4.29	2.44	2.13	1.26	2.15	2.91
Relationship						
x	15.62	9.64	3.65	2.12	4.30	11.32
sd	5.35	3.05	2.66	1.57	2.67	3.64
F ratio	1.19	1.27	.49	.69	1.22	.79
Probability	n. s.	n. s.	n. s.	n. s.	n. s.	n. s.
df (6, 65)						

An examination of Table 15 suggests that the two control groups were superior in terms of adjusted means of total number of words emitted to the Authority concept, as well as positive words and number of nouns and adjectives. The Perceptual Modification model enrollees produced rather consistently the lowest adjusted means of the five counseling groups. It will be noted that the F ratios were low and none were significant.

Results of the analyses of co-variance on number of words associated to Work concepts are presented in Table 16.

TABLE 16

PHOENIX

EXPANDED PERCEPTION TEST (EPT) WORK WORDS

Analysis	ANACOVA EPT - Total Work Words	ANACOVA EPT - Work Positive	ANACOVA EPT - Work Negative	ANACOVA EPT - Work Neutral	ANACOVA EPT - Work Verbs	ANACOVA EPT - Work Nouns
Control I						
x	23.63	15.48	1.38	7.09	8.84	14.66
sd	6.04	3.85	2.17	2.16	3.27	4.08
Control II						
x	23.29	15.90	2.02	4.76	9.84	13.49
sd	7.67	4.87	2.77	2.78	4.12	5.23
Interpersonal						
x	11.67	4.97	2.36	2.07	3.59	8.16
sd	5.40	3.55	1.93	1.95	2.94	3.65
Intrapersonal						
x	22.48	17.99	5.42	2.31	10.29	14.98
sd	4.88	3.12	1.80	1.78	2.60	3.35
Perc. Mod'n.						
x	13.95	11.83	.90	2.52	1.38	12.58
sd	6.55	4.16	2.36	2.40	3.51	4.47
Problem I. D.						
x	20.36	14.51	1.24	5.01	6.82	13.25
sd	4.94	3.15	1.78	1.79	2.64	3.38
Relationship						
x	15.67	13.50	1.19	.94	6.38	9.40
sd	6.21	3.97	2.23	2.23	3.31	4.23
F ratio	.70	1.39	.67	1.00	1.01	.48
Probability	n. s.	<.25	n. s.	n. s.	n. s.	n. s.

The number of positive words associated to the Work concepts was the only one of the six analyses that proved to be significant. The Interpersonal model appeared to have the lowest means in nearly all of the six areas of analyses, while the Intrapersonal model tended to be among the highest.

The last analysis done on the specific concepts concerned the number of words associated to the concept of Self. Results of analyses of covariance are presented in Table 17.

TABLE 17

PHOENIX

EXPANDED PERCEPTION TEST (EPT) SELF WORDS

Analysis	ANACOVA EPT - Total Self Words	ANACOVA EPT - Self Positive	ANACOVA EPT - Self Negative	ANACOVA EPT - Self Neutral	ANACOVA EPT - Self Verbs	ANACOVA EPT - Self Nouns
Control I						
x	24.60	19.87	1.71	2.33	6.42	17.63
sd	5.95	3.61	1.96	1.22	2.85	3.83
Control II						
x	16.76	13.87	.49	3.77	2.54	13.33
sd	7.61	4.65	2.52	1.58	3.68	4.92
Interpersonal						
x	11.67	8.38	1.41	1.69	1.77	10.73
sd	5.32	3.24	1.75	1.08	2.59	3.43
Intrapersonal						
x	22.55	15.11	5.47	3.01	9.62	13.11
sd	4.85	2.96	1.61	.99	2.31	3.13
Perc. Mod'n.						
x	6.75	3.57	.71	1.98	.00	7.36
sd	6.54	3.99	2.14	1.33	3.11	4.20
Problem I. D.						
x	19.21	12.25	2.49	3.72	4.07	14.55
sd	4.93	3.01	1.62	1.01	2.34	3.18
Relationship						
x	13.44	8.97	2.80	1.72	3.80	9.29
sd	6.26	3.80	2.05	1.25	2.96	4.02
F ratio	1.18	2.09	.85	.57	1.55	.78
Probability	n. s.	$<.10$	n. s.	n. s.	.25	n. s.

The Intrapersonal model and Control Group I were among the highest with regard to number of words associated to self. The Perceptual Modification model was consistently among the lowest in terms of adjusted means of number of words for this particular area. The area of positive words associated to self and number of verbs were the two analyses which proved to be significant at or beyond the .25 level.

Discussion: In examining the overall results of the Expanded Perception Test one notes the differences in the populations between Albuquerque and Phoenix. Albuquerque enrollees were in school. The Phoenix enrollees were involved in the work experience program only.

The Albuquerque enrollees had a rather high number of words associated to the various concepts of the Expanded Perception Test. A total of nine analyses yielded F rations which were significant at or beyond the .25 level for the Albuquerque enrollees, while only four F ratios were significant for the Phoenix enrollees. The most plausible explanation for these differences rests with the two different samples. Albuquerque enrollees could be expected to hold a higher level of verbal proficiency. The group counseling served to enrich and further extend their concept meanings.

A comparison of the models that apparently contributed to co-variance analyses differences suggests that the Albuquerque enrollees in the Perceptual Modification and Problem Identification models, were considerably superior to the other approaches in terms of varying thier expression of word associations. The Intrapersonal and Relationship models, as well as the non-treatment control group (Control Group II), rather consistently received the lowest adjusted means to the number of words associated to the stimulus concepts. In contrast, the Phoenix enrollees who apparently profited most were those in the Intrapersonal counseling model and the Control Group I (treatment control group). Those who profited least were in the Interpersonal and Perceptual Modification counseling models. Further reference to these differences will be made later.

One of the characteristics that existed between the Phoenix and Albuquerque sites was differing non-treatment control groups (Control II). In Phoenix enrollees who were in an MDTA program were utilized. This particular program placed considerable emphasis on verbal behavior, and may well account for the rather high adjusted means occurring in the Phoenix "non-treatment" control groups.

One very interesting pattern of responses is found in the analysis of the Perceptual Modification model. The enrollees in this particular counseling model presented the highest number of positive references to Authority and Work, and second highest to Self concept. This finding is in contrast to the low adjusted mean received by this same model regarding number of negative words, particularly in the area of Authority.

The Problem Identification model enrollees consistently had the highest number of words emitted in total count, as well as highest number of words for all the concepts. of positive, negative, neutral, verbs, and nouns.

MEMBER-TO-MEMBER RESPONDING

Audio tapes of the hour long meetings before and after counseling were scored for quantity of direct member-to-member response statements. There was no particular direction to these meetings and they were standardized for counselor input. The purpose was to assess the amount of spontaneous interaction between the enrollees. One of the meetings was held prior to the beginning of counseling, and the other following the last session. An analysis was then made of the taped verbal behavior on the number of member-to-member responses that were elicited in terms of positive, negative, and neutral comments made. Populations were combined for a larger N. A Chi Square was performed and the results are presented in Table 18.

TABLE 18

ALBUQUERQUE AND PHOENIX
MEMBER-TO-MEMBER RESPONDING (INTERACTION)

Control I	Control II	Inter-per'l.	Intra-pers'l.	Perc'l. Modif'n.	Problem Iden'n.	Rela-tion'p.
P N Nu	P N Nu	P N Nu	P N Nu	P N Nu	P N Nu	P N Nu
0 0 0	0 1 3	0 0 1	0 0 1	0 0 0	0 0 0	0 0 1
0 0 12	0 0 0	0 0 4	0 0 2	0 1 17	0 0 0	0 0 0
0 0 0	0 0 0	0 0 0	0 0 1	0 0 0	0 0 0	0 0 0
0 0 0	0 0 2	0 1 3	0 0 0	0 0 0	0 0 0	0 0 0
0 0 12	0 1 5	0 1 8	0 0 4	0 1 17	0 0 0	0 0 1
12	6	9	4	18	0	1
POST						
0 0 0	0 0 0	0 0 0	0 0 9	0 0 3	0 0 2	0 0 0
0 0 3	0 0 0	0 0 15	0 0 5	0 2 11	0 10 11	0 0 1
0 0 1	0 0 0	0 0 0	0 0 0	0 0 0	1 0 0	0 0 0
0 0 2	0 0 1	0 0 17	0 0 6	0 0 2	0 0 2	0 1 7
0 0 6	0 0 1	0 0 32	0 0 20	0 2 16	1 10 15	0 1 8
6	1	32	20	18	26	9

Site

Control I	Control II	Inter-per'l.	Intra-per'l.	Perc'l. Modif'n.	Problem Iden'n.	Rela-tion'p.
-6	-5	+21 (main effect)	+6	+0	+26 (main effect)	+8

$X^2 = 14.50$ p. .05 6 df

The Chi square results were significant at the .05 level and in the predicted direction. It is clear from an inspection of data, that in comparison with the two control groups, there was more interaction following the counseling treatment. Three of the counseling models which contributed a great deal to the main effects were the Problem Identification, the Interpersonal, and the Intrapersonal models.

Discussion: It appears clear that the Problem Identification model was superior to the other models in terms of generating responding between members. Also receiving high ratings were the Interpersonal and the Intrapersonal counseling models. The Problem Identification model, and to a somewhat lesser extent the Interpersonal and Intrapersonal models have as key formats of their procedures the almost forced interaction between members in each of the groups. The Perceptual Modification model is quite deficient in this area. It does not apparently produce any significant member-to-member talk. The Perceptual Modification model places the counselor at the hub of the counseling group, through which nearly all interaction must invariably pass. The counselor responds to each of the clients, rather than the clients' responding to one another.

SUMMARY

To facilitate cross comparison and evaluations between models, the findings for each model were summarized and compared in terms of high, low, average gains for each indicator variable. The designations were taken from the analysis tables and assigned where significant differences were noted at either of the two population sites. Although it is clear that there are obvious differences in the way the models behaved in the two sites, it is not clear why this was so. There were at least two major variables involved.

Phoenix clients were composed of enrollees who were school dropouts, while the Albuquerque groups were composed of an in-school population. The Phoenix models had the advantage of better trained counselors who had participated in developing the counseling models employed in the study. The Albuquerque site had counselors who had received only three weeks of formal preparation in the model counseling. The study was exploratory for the models. Definitive differences between sites and training periods are variables uncovered for further control and study. There is caution therefore in making evaluations with respect to model and site differences, and the same is true for model and the variable of counselor training or preparation time. Which site had which result from which model is only suggestive for more research.

Where a model showed gains regardless of site it would seem clear that the model was the more potent variable. The findings are presented as summary by model and site in order to highlight this latter aspect, but also in order to highlight areas where the model potency could (possibly) be improved by the isolation and addition of one or more site variables.

The tables which follow present relative rankings for each indicator as it exists in association with the other treatment and non-treatment groups by site. The member-to-member responses are limited to the pre-post interaction analysis. The six types of verbal input for counselor behavior was condensed into two areas: target and supportive. Target comments consisted of tasks, modeling and selective responding behavior, which tended to tell, lead, or reinforce for specified group behavior. The supportive comments consisted of "uh huh" and other statements which were judged as supporting to general verbal output and overall interaction-rapport. Comments concerning behavior external to counseling are limited to those instances where obvious behavioral data was found as different for a particular model and site.

CONTROL GROUP I: was a group randomly selected, meeting as a group, but receiving no direct counseling treatment. Instead, they were exposed for equal time periods to supervised study in arithmetic and reading improvement. In many instances a "Hawthorne" type of treatment was noted.

Examination of Table 19 shows that Control Groups I received relatively low scores on the IPAT Anxiety Scale and the V score of the Tennessee Self Concept Scale. They gained high Expanded Perception Test results which suggests that perhaps the leisure time activities, consisting largely of self instruction in reading and of leisure reading in magazines and books of their choice, may have had an influence upon this particular score. The other ratings ranging from enrollee attitude to teacher ratings all suggest low to average scores when compared to the other treatment groups. Both Control Groups I were low on member-to-member interaction which probably results from a lesser opportunity to practice interaction skills.

TABLE 19

SUMMARY OF FINDINGS

CONTROL GROUP I

Criteria	PHOENIX	ALBUQUERQUE
IPAT	low	low
Tennessee - V	low	low
Teacher Ratings (Albuq. only)	----	average to high
Work Supervisors' Rating	low	average
Enrollee Attitude Questionnaire	average to low	average
Expanded Perception	average to high	high
Member-to-Member Response	low	low
External Behavior Data	high work attendence	-----

CONTROL GROUP II: When summarized, the Control Group II ratings show little gain. There is low to average ratings on nearly all of the criteria. The one distinction exists between the Phoenix and Albuquerque enrollees on the area of the Expanded Perception Test. One might account for the higher results for the Phoenix Control Group II by an inspection of the characteristics of the enrollees within this group. As was mentioned earlier, the Phoenix Control Group II was composed by necessity of eight enrollees who were involved in a MDTA training program which requires and emphasizes rather high verbal proficiency. It is entirely possible that this particular training group received enough verbal stimulation in their training to account for the higher scores.

TABLE 20

SUMMARY OF FINDINGS

CONTROL GROUP II

Critera	PHOENIX	ALBUQUERQUE
IPAT	low-average	average
Tennessee - V	high	low
Teacher Ratings (Albuq. only)	-----	average
Work Supervisors' Rating	low	average
Enrollee Attitude Questionnaire	low	low
Expanded Perception	average to high	low
Member-to-Member Responses	low	low
External Behavior Data	low work attendance	----

INTERPERSONAL MODEL: The Interpersonal counseling model places heavy emphasis on the enrollee's rationally examining and describing the expectations he sees from the environment. Enrollee's feelings are not emphasized, but rather his thinking. Results from the model, when compared to the groups and the two sites, suggests rather high similarity between the Phoenix and Albuquerque enrollees. The counselors' target input was low, supportive was high. The counselors also rated this model low while the co-counselors judged it high. This may reflect a difference in expectant behavior. Perhaps the counselors desired to get more at "feelings," while the co-counselors placed a little more emphasis upon the rational aspects of group behavior.

TABLE 21

SUMMARY OF FINDINGS
INTERPERSONAL MODEL

Criteria	PHOENIX	ALBUQUERQUE
IPAT	average	average
TENNESSEE - V	low	high
Teacher Ratings (Albuq. only)	----	low
Work Supervisors' Rating	high	low
Enrollee Attitude Questionnaire	low-average	average
Expanded Perception	low	high
Member-to-Member Responses	high	average
Counselor Behavior		
Target	low-average	low
Supportive	high-average	high
Counselor Ratings		
Client Behavior	low	low
Satisfaction	low	low
Co-counselor Ratings		
Client Behavior	high	high
Satisfaction	high-average	high-average
External Behavior Data	low work attendance	---

INTRAPERSONAL MODEL: One is tempted in examining the summary data for the Intrapersonal model to make some direct judgments with regard to the Phoenix and Albuquerque sites. In Phoenix the Intrapersonal enrollees scored "average" to "high" on all of the criteria variables on which significance was found. The Albuquerque enrollees, on this particular model, however, received "low" to "average" scores on all but the teacher rating. These divergent findings may result from counselor training or from the two different site populations.

The other interesting finding shows that the Intrapersonal model had counselor behavior which was very low with regard to the amount of counselor target input, but quite high on supportive talk. In the Intrapersonal model the focus is upon the self and self aspiration and in this sense resembles the more traditional "Rogerian" type of group counseling and psychotherapy. It is quite possible that the Phoenix counselors, inasmuch as they were more familiar with the model and probably better trained in the use of the model, may have received higher gains because of the complexities involved in this model. Counselor satisfaction was similar to co-counselor satisfaction, all being high. The Intrapersonal model does appear to be one of the more promising of the five explored.

TABLE 22

SUMMARY OF FINDINGS

INTRAPERSONAL MODEL

Criteria	PHOENIX	ALBUQUERQUE
IPAT	high-average	average
Tennessee-V	average	low-average
Teacher Ratings (Albuq. only)	----	high
Work Supervisors' Rating	high	low
Enrollee Attitude Questionnaire	high	average
Expanded Perception	high	low
Member-to-Member Responses	average to high	low
Counselor Behavior		
Target	low	low
Supportive	high	high
Counselor Ratings		
Client Behavior	high	high
Satisfaction	high	high
Co-counselor Ratings		
Client Behavior	high	high
Satisfaction	high	high
External Behavior Data	high work attendance	low school discipline

PERCEPTUAL MODIFICATION MODEL: Several aspects appear as interesting in this model. There were low to average supervisor attitude changes, but high to average enrollee attitude gains. Expanded perception was high in Albuquerque, but low in Phoenix. There was high target input by counselors and low supportive talk. This was, in fact, lowest of all models in both sites, suggesting that the counselor's behavior was rather controlling, perhaps even dominating. This also would tend to account for the lowest ratings received by the clients in their member-to-member responses. The model places considerable emphasis upon each client's responding individually to the counselor, the counselors being the hub of the particular group. Counselor ratings were high in both areas which was in somewhat contradiction to the low to average ratings received by the co-counselor.

TABLE 23
SUMMARY OF FINDINGS
PERCEPTUAL MODIFICATION MODEL

Criteria	PHOENIX	ALBUQUERQUE
IPAT	low	average
Tennessee-V	average	average
Teacher Ratings (Albuq. only)	----	average
Work Supervisors' Rating	low	average
Enrollee Attitude Questionnaire	high	high-average
Expanded Perception	low	high
Member-to-Member Responses	low	low
Counselor Behavior		
Target	high-average	high
Supportive	low	low
Counselor Ratings		
Client Behavior	high	high
Satisfaction	high	high
Co-counselor Ratings		
Client Behavior	average	average
Satisfaction	low	low

PROBLEM IDENTIFICATION MODEL: The results gained from the Problem Identification model show that both sites received the highest IPAT Anxiety Scale ratings. There was some contradiction with regard to the Tennessee V score, however, with Phoenix being high and Albuquerque low.

The Expanded Perception Test results showed that this particular model received a high rating in Albuquerque and a low to average rating in Phoenix. Work supervisor ratings and enrollee attitude questionnaires both received average relative rankings, but the member-to-member responses was the highest among all models, as was the amount of counselor target input and counselor "uh huh" behavior. Interestingly, though, the counselor behavior on the classification "other" was low to average. The counselors evaluated this model highly and the co-counselor was highly satisfied with the particular procedures in counseling but only rated client behavior in the average range. The Problem Identification model was doubtlessly one of the most, if not the most, successful of all of the models.

TABLE 24
SUMMARY OF FINDINGS
PROBLEM IDENTIFICATION MODEL

Criteria	PHOENIX	ALBUQUERQUE
IPAT	high	high
Tennessee - V	high	low
Teacher Ratings (Albuq. only)	----	high
Work Supervisors' Rating	average	average
Enrollee Attitude Questionnaire	average	average
Expanded Perception	low-average	high
Member-to-Member Responses	high	high
Counselor Behavior		
Target	high	high
Supportive	high "uh huh", low "other"	high "uh huh", average "other"
Counselor Ratings		
Client Behavior	high	high
Satisfaction	high	high
Co-Counselor Ratings		
Client Behavior	average	average
Satisfaction	high	high
External Behavior Data	good work attendence	----

RELATIONSHIP MODEL: The Relationship model places considerable emphasis upon communication member-to-member, however, the communication was structured for style as "single" and "completed messages." The model probably could be typified as resembling the familiar "encounter group," and does evoke considerable hostility and feeling. An overall evaluation of the model would suggest that it was less than successful in working with either of the two population groups. On nearly all of the scales for Phoenix the Relationship model enrollees received average to low results, the one exception to this being the IPAT Anxiety Scale, which was average to high relative to the other six groups. The Albuquerque results were somewhat higher, but not markedly different. The counselor behavior, in terms of verbal output, placed the Relationship model at an average relative to the other groups. This model was rated low by counselor and co-counselor. An overall summary of the particular model would suggest that it was not very satisfactory for the populations employed. Although it did achieve high and positive work supervisor attitude change, it did not gain good work attendance for the enrollees.

TABLE 25
SUMMARY OF FINDINGS
RELATIONSHIP MODEL

Criteria	PHOENIX	ALBUQUERQUE
IPAT	average-high	low
Tennessee - V	average	high
Teacher Ratings (Albuq. only)	----	average-low
Work Supervisors' Rating	average	high
Enrollee Attitude Questionnaire	low	average
Expanded Perception	low-average	low
Member-to-Member Responses	low	low
Counselor Behavior		
Target	average	average
Supportive	average	average
Counselor Ratings		
Client Behavior	low	low
Satisfaction	average	average
Co-counselor Ratings		
Client Behavior	low	low
Satisfaction	low	low
External Behavior Data	poor work attendance	--

CHANGE ASSOCIATED WITH COUNSELING

The two month period prior to Counseling was compared to the two month period of Counseling. The data was taken for total program enrollees and gained from the records as kept by the two programs. It should be noted that there were some difficulties in standardizing the data collection procedure in the two program sites. This was due both to the different data processing systems and capabilities of the NYC officers concerned.

In Albuquerque the sample was 100% of the population. In Phoenix, the counseling sample was approximately 65%. The data was presented separately by site and with discussion for each indicator variable of: program termination, job absences, school absence, discipline, grades, and Juvenile Court referrals.

PROGRAM TERMINATIONS

PHOENIX: Total number of NYC program terminations were ascertained from payroll data, and reasons for terminations were garnered from the monthly reports of the Phoenix NYC office. These results are presented in Table 26 for the period from January 18 to March 11 (pre) and March 13 through May 3 (during), 1968.

TABLE 28
PHOENIX
PROGRAM TERMINATIONS AND REASON

REASONS	PRE	DURING
	89	91
Private Employment	19	18
Moved	15	13
Quit, lost interest	17	20
Return to school	4	2
Entered MDTA training	4	26
Entered on-the-job training programs GED, Job Corps, etc. (includes MDTA)	1	30
Military Service	2	2
Discipline institutions	8	5
Other	20	1

ALBUQUERQUE: There were (10) terminations from the program in the time period prior to counseling, and (5) in the equal period during counseling. No clear trend appears with respect to reason.

DISCUSSION: For Phoenix there is a definite tendency for terminations during counseling to be of a more favorable variety, especially in terms of number of recruitments for supportive training programs. In Albuquerque although small numbers are noted for both periods, there is 50% reduction of termination.

JOB ABSENCES

PHOENIX: The frequency of job absences was calculated from available records. For various reasons the data was incomplete. Gross inspection however, indicated increases during the counseling period for all groups except Problem Identification. There was less increase for models than controls during the counseling period.

ALBUQUERQUE: Job absences were calculated from payroll records by finding the ratio of total time worked divided by total possible work time (10 hours per week). Table 27 shows the percentage of unworked time for each group. For Albuquerque it was also possible to secure data for a period following counseling. The after period is equal to one-half of the total during time.

TABLE 27

ALBUQUERQUE
PERCENT OF JOB ABSENCES BY MODEL

GROUP	PRIOR	DURING	AFTER
Control I	3.3	5.9	0.0
Control II	4.8	4.2	0.0
Interpersonal	6.7	7.2	15.0
Intrapersonal	10.9	4.8	1.6
Perceptual Modification	2.5	4.2	10.0
Problem Identification	1.2	3.9	0.0
Relationship	4.9	3.3	2.8
All Counseled Groups	5.5	4.7	5.9
Total Groups	5.1	4.4	4.2

DISCUSSION: In Phoenix there is a tendency for more job absences during the counseling period. The data was incomplete for the prior period. However Problem Identification indicated a decrease and less increase was observed for models than controls.

In Albuquerque there was positive effect for total groups and also for counseled groups when compared to controls. This is contrary to the trend in Phoenix. However, the data from Albuquerque is perhaps more accurate, coming from direct payroll printouts and including a post counseling observation.

Intrapersonal and Relationship models were successful in the aspect of job absence reduction and also the Problem Identification model when the post counseling period is noted.

SCHOOL ABSENCES, SCHOOL DISCIPLINE, AND SCHOOL GRADES

ALBUQUERQUE: School absences were tabulated from the school records of the in-school Albuquerque population. There were 309 absences prior to counseling and 398 during counseling. The figures were such that a few individuals in each case contributed disproportionately to the total frequency. It was thought best, therefore, to run a median test on the pre-post differences. These results are presented in Table 28.

TABLE 28

ALBUQUERQUE

RESULTS OF THE MEDIAN EXTENSION TEST
FREQUENCY OF ABOVE AND BELOW
MEDIAN SCHOOL ABSENCES

	CONTROL I	CONTROL II	INTER-PER'L.	INTRA-PER'L.	PERC'L MODIF'N.	PROB. I. D.	RELA-TION'P.
Above Median	7	4	4	3	6	5	4
Below Median	9	9	7	10	4	6	9

p 20 $x^2 = 9.17$ 6 df

Although the obtained Chi square was significant at the .20 level, the trend of the results is unclear. Only the Perceptual Modification model had a difference in the positive direction, but this was very slight.

The defensible generalization would argue that the counseling treatment co-existed with a slight but significant decrease in school attendance.

School records showed the youth who had been sent to the principal's office for discipline. A tabulation of these cases showed 12 prior to counseling and 23 during counseling, leading to a conclusion similar to that made in the above section on school attendance. The "n" by cell was insufficient to attempt a between group analysis.

Grade point averages were calculated from school records of the grading periods immediately prior to and immediately following counseling. The analysis may be considered to be a check of the grade analysis which was reported earlier as part of the Teacher Attitude Questionnaire. As in that analysis there was no clear tendency for the post-counseling GPA to be either higher or lower than the pre-counseling on the post GPA, utilizing pre GPA as the co-variate, produced an F ratio which was in-sufficient to reject the null hypothesis of no difference between groups (F = .85, p 25, df 6. 101). It was concluded, therefore, that the group counseling experience had no measurable effect on actual school performance - a conclusion which supports the findings of other researchers interested in the effects of group counseling on scholastic achievement such as Uriuk, 1966.

JUVENILE COURT REFERRALS

The referrals were gained directly from the juvenile court (police) files. For Phoenix, all NYC enrollees in the out-of-school program were observed, including those outside of the counseled groups. In Albuquerque, all enrollees were also observed, but everyone on the program was in one of the treatment or control groups. All drops and adds are included for the entire before and during period.

In Phoenix, there were (19) referrals before and (14) during, a reduction of (5). In Albuquerque there were (9) before and (4) during, a reduction of (5). Although small numbers are involved, there is a clear and decided trend in both populations in the positive direction.

In Albuquerque, 3 of the 4 incidents, during counseling, were from model groups but they were traffic tickets. There were no felonies. The 9 incidents in the pre-period included thefts and carrying of deadly weapons.

In Phoenix there were more extreme incidents for both pre and during periods. There was a trend, however, for reducing these. The pre-period included 11 extremes and the during period, 5. Only two are reported for enrollees in counseled groups which involved approximately 65% of the total.

The incidents were summed for both populations in order to facilitate statistical analysis. The analysis is reported in Table 29. The N is a total of all enrollees present for both periods and both populations and includes those who were added and dropped.

TABLE 29

ALBUQUERQUE AND PHOENIX
COURT REFERRALS BY INCIDENT

SITE	PRIOR	DURING	N
Albuquerque	9	4	342
Phoenix	19	14	349
Total	28	18	691

$x^2 = 2.44$ p 20 1df

When enrollees from both populations are combined, a significant difference is noted. The counseling treatment is clearly associated with a reduction of delinquent behavior. Two possible explanations seem appropriate: (1) The Hawthorne effect - "They are paying attention to us," "I am one of 'us', therefore I feel better about myself." (2) In the

Interpersonal Underworld, Shutz has theorized that every individual has three needs: Inclusion, Control, and Affection, and that interpersonal relationships are greatly influenced by these needs. They are manifested in marching sequence but each need has a marked influence upon the other two. The extended group counseling and interaction provided a means to work through Inclusion issues with one another; therefore, Control needs were also reduced. Shutz sees Control behavior as various forms of psychopathy or delinquency. A reduction of delinquency could therefore result from an emphasis and experience with Inclusion.

DISCUSSION: Sufficient evidence has been introduced to support the concept of behavioral modification as a result of group counseling. It is also apparent that some models do better than others in this regard. As in the case of the objective and attitude findings, certain models arise as more effective in bringing about positive change over and above the general Hawthorne effect. Problem Identification, and Intrapersonal appear more positive, while Interpersonal and Relationship appear less so.

SUMMARY

Little can be said about the standardized questionnaires. Some possible indicators are increased anxiety for self improvement and increased variability of self concept responses. Problem Identification and Intrapersonal emerged more promising in this regard, but the validity of the data must be questioned because of enrollee reading level and motivation. For this reason we had more confidence in the especially designed non-standardized scales. Here we found changes both in enrollee attitudes and in the attitudes of teacher and work supervisors toward the enrollees.

Teacher and work supervisors held more favorable attitudes toward enrollees following counseling. Interpersonal, Intrapersonal, and Relationship emerged more favorable in this regard. Enrollee attitudes also improved and especially so for the out-of-school population where seven of the sixteen items were improved with confidence beyond the .05 level. Perceptual Modification emerged the more favorable.

Expanded Perception was appraised by quantity and quality of response words emitted in the presence of a tape recorded selection of stimuli word-clusters. The three major areas were: Authority, Work, and Self. The data was gained from frequency counts for the total, and totals in each of the three categories: Positive, Negative, Neutral, Nouns, and Verbs were analyzed for each category. There were differences between Phoenix and Albuquerque populations in the frequency improvements. Out of twenty-four separate analysis of co-variance in each population, Phoenix showed improvement in four at the level of .25 or beyond. In Albuquerque, nine of the twenty-four improved at this level or beyond. For positive self references, verb self references, and noun work references, the level was .10. For positive references for authority, the improvement was at the .05 level of confidence. The Albuquerque in-school enrollees could be expected to hold a higher level of verbal proficiency. For these enrollees, the counseling tended to extend their concept meanings and particular so to the more positive for authority figures. There may also have been an expansion tendency in Phoenix. However, here the lower level of initial verbal proficiency was apparently less vulnerable to the enrichment offered by the counseling. Perceptual Modification, and Problem Identification emerged as more successful in this regard.

A one hour session prior to counseling and again following counseling was structured for a climate favorable to member-to-member responding and not pointed to any particular model. The audio tapes of these sessions were then scored for quantity of direct response between members. The populations were combined and a Chi square performed which emerged as significant at the .05 level. All models improved beyond controls with Problem Identification and Interpersonal the more favorable in this regard and Perceptual Modification least favorable.

The group counseling improved enrollee facility for direct responding to each other. There were attitude improvements of teachers and work supervisors. In Phoenix, the attitudes of the enrollees themselves improved. In Albuquerque, there was enrichment of verbal proficiency with references to authority expanded and more positive. Problem Identification appeared more favorable for increasing motivation for self improvement, being positive teacher attitudes, and member-to-member responding. Perceptual Modification and Problem Identification appeared best for the enrichment of verbal proficiency and expanded perception on self and authority to positive. Perceptual Modification and Intrapersonal seemed most efficient for attitude toward program improvement, and Interpersonal and Relationship seemed better for improving attitude of work supervisors.

The counseling was supportive and associated with behaviors usually considered more socially adjustive. In Albuquerque, where the sample was the total program, there was 50% reduction of termination. In Phoenix, there was clear tendency for terminations to be of a more favorable variety with more recruitments for supportive training programs.

In job absences there was increase in Phoenix and reduction in Albuquerque, but in both sites the Problem Identification model groups showed positive effects. When enrollees from both programs were combined, there was a significant decrease in juvenile court referrals. This was true for both quanitity and kind with a reduction of felonies.

PART IV

DESCRIPTIONS OF THE COUNSELING PROCESS

In addition to the findings concerning changes in enrollees, it was felt to be important to give as much process description and counselor experience with the models as possible. In a pragmatic sense, one often finds the counselors comfort with the procedure as important as the procedure itself. In new procedures, one also finds it useful to see the process in more detail. Explorations are most useful to future research when they find as much definitive-description as possible so that one may vary further trials and make decisions about trial procedures. To this end we have attempted to describe the verbal interactions within, and across sessions and to also indicate our findings from observing the counselors evaluations of the various models. We were concerned about how he felt about himself and how he felt about his professional contribution as he counseled with the various methods. We tried, also, to find differences between the more intensively trained and less trained counselors both in his model input and his sense of comfort.

THE INTERACTION ANALYSIS

Verbal behaviors during sessions were scored and tabulated from the audio tape recordings. A fifty per cent sample was taken from each session. There were twelve categories with six for counselors and five for members. All statements for the segment were scored in either a counselor or member category. Each statement was considered as discrete and included all verbalization until interruption. The categories for counselor were: task prescription, selective responding (target), selective responding (off target), uh huh, and other. The member categories were: desired behavior, member responding positive, negative, neutral, and other statements. There were two additional categories for scoring ease of multiple verbal and inaudible.

Each session was divided into time segments of first, middle, and last twenty minute periods. There were fourteen sessions per model for each of four counselor teams. Thus six aspects of counselor input, five of member response and interaction for eight hundred and forty segments divided equally between first, middle, and last periods of a session. The quantities of statements for each category were tabled for inspection and cross comparison in terms of within session change and change between and across progressive sessions. The questions were: "Do counselors and members behave consistently different in the beginning, middle or ending of sessions?" "Are there discernable differences in input or response between sessions?" "Are there any trends or differences among the models in this regard?"

The data is reported in terms of descriptions of quantities of input and response and organized as within session time segments where comparisons can be observed for quantities occurring among first, middle and last segments, and secondly with descriptions of quantities occurring between the progressive fourteen sessions. Member-to-member responding quantities are treated separately as are the results and trends in quality of interaction as observed from the raters scoring of categories for selected progressive sessions.

WITHIN SESSION TIME SEGMENTS:

COUNSELOR BEHAVIOR (INPUT): Table 30 presents these data by time segment and model. Mean quantities for all counselors are used for each category.

TABLE 30

PHOENIX AND ALBUQUERQUE

MEAN QUANTITY OF COUNSELOR VERBAL BEHAVIOR WITHIN SESSION TIME SEGMENTS

	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
Model								
Inter'l.								
1st	3.8	1.6	8.5	13.9	1.3	9.6	45.1	56.0
2nd	3.3	1.4	10.7	15.4	.1	10.6	42.2	52.9
3rd	3.1	2.1	10.8	16.0	.4	10.4	35.0	45.8
Intra'l.								
1st	4.8	.9	6.7	12.4	.2	8.6	60.4	69.2
2nd	4.7	.6	7.0	12.3	.1	9.2	54.6	63.9
3rd	3.5	.5	6.5	10.5	.3	9.2	49.9	59.4
Perc. Mod'n.								
1st	15.7	3.3	13.1	32.1	.1	3.0	32.3	35.4
2nd	15.7	4.0	13.5	33.2	.1	3.9	19.7	23.7
3rd	16.3	4.5	15.0	35.9	.1	3.3	17.6	21.0
Problem Iden'n.								
1st	15.4	2.8	22.2	40.4	1.3	14.7	37.1	53.1
2nd	15.3	4.1	27.2	46.6	1.5	14.3	20.3	36.1
3rd	14.0	4.5	23.7	42.2	1.4	16.6	22.4	40.4
Relationship								
1st	9.4	1.3	12.4	23.1	.1	8.8	31.3	40.2
2nd	7.6	1.6	14.3	23.5	.2	9.3	24.9	34.4
3rd	8.2	1.8	13.8	23.8	.1	8.5	21.9	30.5

The most obvious finding from examining Table 30 is the high degree of within-model consistency between time intervals. The counselors' verbal behavior was, by and large, the same from the beginning through the end of each counseling session. The exception to this is "other" responses which diminished in all models as the sessions progressed. "Other" talk was used as rapport building. The drop in frequency suggests that counselors needed fewer rapport statements as the counseling session progressed.

While consistency was evidenced within each model, some of the counseling models did vary one to another. This is particularly apparent when one examines the mean responses of the Interpersonal and Intrapersonal models as contrasted to the other three. In these two models the counselors' verbal behavior in terms of frequency of responses is quite similar to the counselors' verbal behavior in the Perceptual Modification and Relationship models. Counselors employing the Problem Identification model evidence greater "targeting" and "uh-huh" behavior. Caution is used when comparing verbal behavior between models inasmuch as what is "target" behavior in one model is not the same as target behavior in another model. The method is the same, but the focus was different for each model.

COUNSELOR BEHAVIOR BY SITE: A second analysis was directed toward comparing counselor behaviors by population. The results of this analysis are presented for Albuquerque and Phoenix counselors in Table 31.

TABLE 31

ALBUQUERQUE VS. PHOENIX
COUNSELOR BEHAVIOR BY MODEL AND SITE

	TASK	MODEL	S.R. TARGET	OFF TARGET	UH HUH	OTHER
Interpersonal						
Albuq.						
x	14.01	7.64	33.20	*	37.81	136.70
sd	9.89	7.49	30.45		14.12	62.68
Phoenix						
x	8.00	5.58	32.73	*	26.46	121.61
sd	6.04	5.98	21.83		13.21	58.87
f ratio	6.98	.88	.00		9.12	.08
probability	< .05	n.s.	n.s.		< .005	n.s.
df	(1, 50)				(1, 51)	
Intrapersonal						
Albuq.						
x	17.53	1.56	27.78	1.82	26.75	187.46
sd	12.33	1.09	22.00	1.60	16.51	91.53
Phoenix						
x	8.93	4.28	12.25	3.60	27.43	142.46
sd	6.58	4.53	9.76	2.19	13.32	46.03
f ratio	9.88	5.50	11.66	3.41	.02	5.40
probability	.005	.05	.005	n.s.	n.s.	.05
df	(1, 53)	(1, 35)	(1, 64)	(1, 14)		(1, 54)
Perceptual Mod'n.						
Albuq.						
x	58.67	13.50	45.89	*	7.50	88.57
sd	25.04	10.83	16.87		7.87	34.59
Phoenix						
x	36.64	10.37	37.21	*	12.78	50.71
sd	17.65	7.84	16.55		12.83	27.74
f ratio	14.48	1.49	3.77		3.45	20.41
probability	<.001	<.25	< .10		< .10	<.001
df	(1, 54)	(1, 53)	(1, 54)		(1, 54)	(1, 54)

* too small n

TABLE 31
(cont.)

	TASK	MODEL	S.R. TARGET	OFF TARGET	UH HUH	OTHER
Problem I.D.						
Albuq.						
x	54.74	11.12	77.14	9.44	48.46	100.78
sd	26.24	9.18	43.55	14.16	14.19	72.81
Phoenix						
x	36.71	13.37	71.78	7.00	42.71	58.86
sd	13.59	10.88	29.52	1.01	20.24	39.17
f ratio	10.33	.64	.02	.00	1.51	7.20
probability	$<.01$	n.s.	n.s.	n.s.	$<.25$	$<.01$
df	(1,53)				(1,54)	(1,54)
Relationship						
Albuq.						
x	31.96	6.73	42.53	1.75	28.50	80.88
sd	13.83	6.67	22.56	.50	22.59	41.33
Phoenix						
x	22.42	5.13	44.77	1.83	28.61	87.23
sd	14.44	3.52	26.26	.75	12.79	47.07
f ratio	5.91	1.02	.01	.00	.00	.00
probability	$<.05$	n.s.	n.s.	n.s.	n.s.	n.s.
df	(1,50)					

The Albuquerque counselors were consistently higher than the Phoenix counselors with regard to nearly all of the six forms of counseling input behavior. On the number of task prescriptions, the level of significant differences of the Phoenix and Albuquerque counselors input means was significant at or beyond the 5 per cent level for every counseling model with the means higher for the Albuquerque counselors. Significance was reached on the Intrapersonal and the Perceptual Modification on modeling behavior. The Phoenix counselors did significantly more modeling than did the Albuquerque counselors on the Intrapersonal model. The other significant mean difference found in favor of the Phoenix counselors was in the Perceptual Modification model for selective responding "uh huh." On all of the other counselor input data where significantly different means were identified, the Albuquerque counselors received the higher mean.

MEMBER BEHAVIOR: Table 32 presents the means of the various behavior categories for all members of all groups by model.

TABLE 32

MEAN QUANTITY OF MEMBER VERBAL BEHAVIOR FOR ALL CATEGORIES WITHIN SESSION TIME SEGMENTS PHOENIX AND ALBUQUERQUE

	Desired Behavior	Other	Positive	Negative	Neutral	Total Mem. to Mem.
Model						
Inter'l.						
1st	14.1	58.5	.8	.6	8.9	10.3
2nd	19.1	48.6	.7	.3	5.4	6.4
3rd	17.1	50.9	1.4	.4	7.4	9.2
Intra'l.						
1st	12.8	93.0	.2	1.1	6.5	7.8
2nd	15.0	94.6	.4	1.6	6.1	8.1
3rd	13.7	99.5	.7	1.6	7.5	9.8
Perc. Mod.						
1st	19.9(4.0)	41.9	.7	.3	.5	1.5
2nd	22.4(5.9)	26.9	.6	.4	.5	1.5
3rd	24.5(5.8)	27.2	.4	.6	.1	1.1
Prob. I.D.						
1st	62.1	63.5	8.3	6.7	9.8	24.8
2nd	85.1	38.5	8.7	4.6	7.8	21.1
3rd	71.5	41.3	10.5	3.8	9.1	23.4
Relation'p.						
1st	18.9	29.3	.5	.3	1.4	2.2
2nd	24.0	27.6	.9	.3	3.5	4.7
3rd	24.2	22.1	1.4	1.3	2.2	4.9
Time Segment Totals						
1st	127.8	286.2	10.5	9.0	27.1	46.6
2nd	165.6	236.2	11.3	7.2	23.3	41.8
3rd	151.0	251.0	14.4	7.7	26.3	48.4
TOTALS	444.4	773.4	36.2	23.9	76.7	136.8

As with counselors' verbal responses, the clients were relatively consistent from beginning to end of sessions, particularly so in the Interpersonal and Intrapersonal models. The Perceptual Modification and Problem Identification models showed a drop in the "other" behavior, and an increase in the "desired behavior" as the session progressed.

DISCUSSION: Several interesting points can be identified with regard to findings. The first and most obvious is that the Albuquerque counselors emitted a great deal more general verbal output. This was particularly the case on task prescription statements, which is the general classification area under which directions which are given by the counselor telling the client what to do are rated. High levels of significance were also found for the on-target counselor behavior on the Intrapersonal model in favor of Albuquerque counselors doing more. The reverse, however, in the case when one looks at modeling behavior for the Phoenix counselors employing the Intrapersonal counseling model. Here the input was higher. There was considerably more "other" talk by the Albuquerque counselors. The difference was significant on the Intrapersonal, Perceptual Modification, and the Problem Identification models.

The findings suggest that the Albuquerque counselors who received less training in the counseling procedures were more authoritative and directive. A second interesting finding is the great amount of variance between models, regardless of site. The greatest amount of verbal behavior on the part of counselors occurs in the Problem Identification model, while the least amount of counselor talk occurred in the Perceptual Modification model.

The comparison of client verbal response means between models suggests similar comparisons to the counselors' responses. Interpersonal and Intrapersonal models show similar client mean response patterns as do the Perceptual Modification and Relationship models. The Problem Identification model demonstrates very clear differences from the other models on all client response means.

BETWEEN PROGRESSIVE SESSIONS:

COUNSELOR BEHAVIOR (INPUT): Counselor behavior is presented in terms of mean quantities for each model in Table 33. The data shows across session progressive movement. Sessions 1 and 16 were pre and post testing periods.

TABLE 33

ALBUQUERQUE AND PHOENIX

COUNSELOR BEHAVIOR BY SESSION

Interpersonal Model

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	16.5	8.0	59.0	83.5	4.0	31.7	37.0	68.7
3	14.7	6.2	48.2	69.1	1.7	22.2	64.5	86.7
4	16.2	3.5	30.5	50.2	1.0	31.7	120.5	152.2
5	12.2	9.2	26.5	47.9	14.2	31.7	125.5	147.2
6	13.7	4.0	55.0	72.7	0.0	35.5	89.2	124.7
7	19.0	7.2	46.7	72.9	0.0	38.2	96.7	134.9
8	7.2	11.0	25.5	43.7	0.2	25.5	155.2	180.7
9	5.2	1.7	18.2	25.1	0.0	29.5	128.5	157.7
10	9.5	8.7	26.5	44.7	0.0	48.2	186.0	234.2
11	9.0	3.5	24.2	36.7	4.2	33.0	149.7	182.7
12	8.2	2.2	33.0	43.4	0.0	38.2	111.0	149.2
13	5.2	2.5	10.2	17.9	0.0	16.7	104.7	121.4
14	3.2	2.0	5.7	10.9	0.0	26.5	189.5	216.0
15	2.7	1.5	10.7	14.9	0.0	18.5	155.0	173.5

TABLE 33
(cont.)

Intrapersonal Model

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	20.0	3.2	36.2	59.4	1.5	24.0	172.0	196.0
3	26.2	0.7	45.0	71.9	1.0	28.7	151.5	180.2
4	11.0	0.7	20.0	31.7	2.5	24.5	177.5	202.0
5	19.7	2.2	26.2	48.1	2.5	34.7	120.0	154.7
6	5.7	1.7	12.0	19.4	0.7	32.5	147.2	179.7
7	21.2	3.5	35.5	60.2	0.0	48.5	130.0	178.5
8	10.7	4.2	17.2	32.1	0.2	23.0	153.5	176.5
9	11.0	0.2	17.7	28.9	0.2	19.2	158.2	177.4
10	4.7	0.7	8.0	13.4	0.0.	19.7	155.2	174.9
11	7.2	4.2	10.7	22.1	0.0	18.7	205.2	223.9
12	10.0	1.5	5.7	17.2	0.5	15.0	178.0	193.0
13	11.7	0.2	17.7	29.6	0.2	24.5	184.7	209.2
14	12.2	2.0	15.5	29.7	0.0	35.2	178.0	213.2
15	10.0	3.2	12.5	25.7	0.0	30.7	198.2	228.9

Problem Identification Model

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	39.5	9.2	55.0	103.7	0.0	60.7	85.2	145.9
3	48.7	5.0	71.5	125.2	0.0	37.7	63.0	100.7
4	39.5	11.7	63.5	114.7	0.0	37.7	58.7	96.4
5	41.5	4.7	44.5	90.7	8.5	41.0	82.0	123.0
6	48.7	22.5	111.0	181.2	1.0	43.0	23.7	66.7
7	54.5	11.7	72.5	138.7	1.2	47.2	74.2	121.4
8	47.5	12.5	76.2	136.2	1.2	49.7	71.5	121.2
9	50.7	12.0	70.2	132.9	3.5	53.7	92.7	146.4
10	48.0	23.7	101.2	172.9	4.7	39.2	43.0	82.2
11	49.7	16.7	68.0	134.4	15.5	47.7	78.2	125.9
12	33.5	14.0	90.0	137.5	6.0	43.2	87.0	130.2
13	34.7	2.5	57.7	94.9	6.5	45.7	36.0	181.7
14	53.7	7.7	84.0	144.4	2.7	42.0	94.5	136.5
15	36.0	5.5	57.7	99.2	7.7	49.2	27.5	176.7

TABLE 33
(cont.)

Perceptual Modification Model

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	53.5	12.5	44.2	110.2	0.0	14.7	79.2	93.9
3	34.5	13.2	40.5	88.2	0.5	7.7	59.0	66.7
4	40.5	12.7	55.7	108.9	1.0	9.2	86.5	95.7
5	37.5	6.0	36.0	79.5	0.0	7.0	96.0	103.0
6	37.7	11.0	45.0	93.7	0.0	5.5	71.7	77.2
7	43.0	13.2	68.7	124.9	0.2	9.7	55.2	64.9
8	38.5	14.2	50.0	102.7	0.5	13.2	76.7	89.9
9	42.0	15.0	33.7	90.7	0.0	14.7	62.0	76.7
10	52.2	11.0	34.5	97.7	0.2	3.5	74.7	78.2
11	59.5	14.7	42.5	116.7	0.0	8.2	66.2	74.4
12	50.7	10.5	28.2	89.4	0.5	13.2	49.7	62.9
13	63.5	9.7	33.5	105.7	1.2	12.5	37.5	50.0
14	45.0	8.5	33.5	97.0	0.0	7.2	105.2	112.4
15	60.0	12.0	35.5	116.5	0.0	15.2	55.0	70.2

Relationship Model

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	32.5	8.2	39.5	80.2	0.2	28.2	90.5	118.7
3	38.2	9.7	55.2	103.1	1.7	35.5	55.2	90.7
4	28.5	2.7	30.0	61.2	0.2	23.5	24.5	48.0
5	25.5	3.7	45.2	74.4	1.0	25.2	81.0	106.2
6	22.7	10.7	46.5	79.9	0.5	38.7	66.7	105.4
7	32.2	7.2	35.0	74.4	0.0	20.7	54.7	75.4
8	43.7	4.7	82.7	131.1	0.5	32.2	86.7	118.9
9	24.5	8.2	43.7	76.4	0.2	25.0	85.7	110.7
10	6.7	1.2	9.7	17.6	0.0	13.2	45.7	58.9
11	12.7	3.0	24.7	40.4	0.0	27.2	112.2	139.4
12	19.2	1.2	37.0	57.4	0.0	41.5	76.5	118.0
13	18.0	2.2	23.7	43.9	0.0	24.0	104.0	128.0
14	24.2	2.0	54.0	80.2	0.0	17.2	112.7	129.9
15	24.5	1.2	40.2	65.9	0.0	18.7	96.2	114.9

COUNSELOR BEHAVIOR BY SITE: Table 34 presents the data as compared between the Albuquerque and Phoenix counseling sites where the training is the important variable.

TABLE 34

ALBUQUERQUE VS. PHOENIX

COUNSELING BEHAVIOR BY SESSION

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
Interpersonal Model - Phoenix								
2	3.0	0.5	10.5	14.0	0.0	10.5	42.5	53.0
3	11.0	6.5	24.5	42.0	0.0	8.5	76.5	85.0
4	14.5	6.5	31.0	52.0	0.0	18.5	87.0	105.5
5	7.0	15.5	29.0	51.5	0.0	23.5	115.5	139.0
6	14.5	5.5	72.5	92.5	0.0	30.0	98.5	128.5
7	8.0	9.0	56.0	73.0	0.0	32.0	61.5	93.5
8	3.5	15.0	26.0	44.5	0.0	18.0	172.5	190.5
9	8.0	3.5	22.0	33.5	0.0	25.0	74.0	99.0
10	3.0	14.0	23.0	40.0	0.0	33.0	189.5	222.5
11	9.0	5.5	34.0	48.5	8.5	31.5	166.5	198.0
12	8.5	4.0	55.0	67.5	0.0	39.0	90.0	129.0
13	7.5	4.5	16.5	28.5	0.0	23.0	118.5	141.5
14	3.0	2.5	10.0	15.5	0.0	32.5	158.5	191.0
15	3.5	3.0	15.5	22.0	0.0	19.0	130.0	149.0
Interpersonal Model - Albuquerque								
2	30.0	15.5	107.5	153.0	8.0	53.0	31.5	84.5
3	18.5	6.0	72.0	96.5	3.5	36.0	52.5	88.5
4	18.0	0.5	30.0	48.5	2.0	45.0	154.0	199.0
5	17.5	3.0	24.0	44.5	28.5	40.0	135.5	175.5
6	13.0	2.5	37.5	53.0	0.0	41.0	80.0	121.0
7	30.0	5.5	37.5	73.0	0.0	44.5	132.0	176.5
8	11.0	7.0	25.0	43.0	0.5	33.0	138.0	171.0
9	2.5	0.0	14.5	17.0	0.0	33.5	183.0	216.5
10	16.0	3.5	30.0	49.5	0.0	63.5	182.5	246.0
11	9.0	1.5	14.5	25.0	0.0	34.5	133.0	167.5
12	8.0	0.5	11.0	19.5	0.0	37.5	132.0	169.5
13	3.0	0.5	4.0	7.5	0.0	10.5	91.0	101.5
14	3.5	1.5	1.5	6.5	0.0	20.5	220.5	241.0
15	2.0	0.0	6.0	8.0	0.0	18.0	180.0	198.0

TABLE 34
(cont.)

ALBUQUERQUE VS. PHOENIX

COUNSELING BEHAVIOR BY SESSION

Intrapersonal Model - Phoenix

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	13.5	5.5	15.5	34.5	0.0	22.5	213.0	235.5
3	10.5	1.0	24.5	36.0	1.0	31.0	141.0	172.0
4	4.0	1.0	12.0	17.0	3.0	18.0	146.0	164.0
5	17.0	4.0	23.5	44.5	3.0	40.0	103.5	143.5
6	5.0	3.0	11.5	19.5	1.0	32.5	135.5	168.0
7	10.5	5.5	19.5	35.5	0.0	44.0	68.0	112.0
8	9.0	8.0	18.5	35.5	0.0	23.5	111.0	134.5
9	3.0	0.5	4.0	7.5	0.0	14.5	140.5	155.0
10	4.0	0.5	5.0	9.5	0.0	20.5	148.0	168.5
11	7.0	8.5	9.5	25.0	0.0	20.5	199.0	219.5
12	7.5	1.5	7.0	16.0	1.0	17.0	124.5	141.5
13	7.0	0.5	5.5	13.0	0.0	21.0	160.0	181.5
14	16.5	0.0	12.0	28.5	0.0	46.5	150.5	197.0
15	6.0	5.5	3.5	15.0	0.0	23.0	154.0	177.0

Intrapersonal Model - Albuquerque

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	26.5	1.0	57.0	84.5	3.0	25.5	131.0	156.5
3	42.0	0.5	65.5	108.0	1.0	26.5	162.0	188.5
4	18.0	0.5	28.0	46.5	2.0	31.0	209.0	240.0
5	22.5	0.5	29.0	52.0	2.0	29.5	136.5	166.0
6	6.5	0.5	12.5	19.5	0.5	32.5	159.0	191.5
7	32.0	1.5	51.5	85.0	0.0	53.0	192.0	245.0
8	12.5	0.5	16.0	29.0	0.5	22.5	196.0	218.5
9	19.0	0.0	31.5	50.5	0.5	24.0	176.0	200.5
10	5.5	1.0	11.0	17.5	0.0	19.0	162.5	179.5
11	7.5	0.0	12.0	19.5	0.0	17.0	211.5	228.5
12	12.5	1.5	4.5	18.5	0.0	13.0	231.5	244.5
13	16.5	0.0	30.0	47.5	0.5	28.0	209.5	237.5
14	8.0	4.0	19.0	31.0	0.0	24.0	205.5	229.5
15	14.0	1.0	21.5	36.5	0.0	38.5	242.5	281.0

TABLE 34
(cont.)

ALBUQUERQUE VS. PHOENIX
COUNSELING BEHAVIOR BY SESSION

Perceptual Modification Model - Phoenix

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	36.5	6.0	25.0	67.5	0.0	8.0	63.5	71.5
3	21.0	6.0	37.0	64.0	0.0	5.0	47.0	52.0
4	26.5	8.0	46.5	81.0	0.0	7.5	39.0	46.5
5	37.0	3.0	29.0	69.0	0.0	2.0	43.5	45.5
6	14.5	11.5	52.0	78.0	0.0	6.0	54.5	60.5
7	33.0	8.0	69.0	110.0	0.5	13.0	28.0	41.0
8	37.5	18.0	35.5	91.0	0.0	14.5	90.0	104.5
9	33.5	12.0	38.5	84.0	0.0	23.5	31.0	54.5
10	37.5	14.5	20.0	72.0	0.5	5.5	74.0	79.5
11	62.5	24.0	46.0	132.5	0.0	15.0	69.0	84.0
12	37.0	9.0	30.0	76.0	0.0	17.5	26.0	43.5
13	43.0	7.0	30.0	80.0	0.0	22.0	29.0	51.0
14	38.0	3.0	26.5	67.5	0.0	13.5	81.5	95.0
15	55.5	10.0	36.0	101.5	0.0	26.0	34.0	60.0

Perceptual Modification Model - Albuquerque

2	70.5	19.0	63.5	162.0	0.0	21.5	95.0	116.5
3	48.0	20.5	44.0	112.5	1.0	10.5	71.0	81.5
4	54.5	17.5	65.0	138.0	2.0	11.0	134.0	145.0
5	38.0	9.0	43.0	90.0	0.0	12.0	148.5	160.5
6	61.0	10.5	38.0	109.5	0.0	5.0	89.0	94.0
7	53.0	18.5	68.5	140.0	0.0	6.5	82.5	89.0
8	39.5	10.5	64.5	114.5	1.0	12.0	63.5	75.5
9	50.5	18.0	29.0	97.5	0.0	6.0	93.0	99.0
10	67.0	7.5	49.0	123.5	0.0	1.5	75.5	77.0
11	56.5	5.5	39.0	107.0	0.0	1.5	63.5	65.0
12	64.5	12.0	26.5	103.0	1.0	9.0	73.5	82.5
13	84.0	12.5	37.0	133.5	2.5	3.0	46.0	49.0
14	52.0	14.0	40.5	106.5	0.0	1.0	129.0	130.0
15	82.5	14.0	35.0	131.5	0.0	4.5	76.0	80.5

TABLE 34
(cont.)

ALBUQUERQUE VS. PHOENIX

COUNSELING BEHAVIOR BY SESSION

Problem Identification Model-Phoenix

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	32.0	6.0	55.5	93.5	0.0	63.5	92.5	156.0
3	38.5	5.0	97.0	140.5	0.0	31.5	28.5	60.0
4	43.5	10.5	58.5	112.5	0.0	33.5	53.0	86.5
5	33.5	4.5	51.5	89.5	16.0	29.0	69.5	98.5
6	30.5	30.5	111.0	172.0	1.0	38.0	24.0	62.0
7	34.5	10.5	69.0	114.0	1.5	27.5	36.0	63.5
8	33.0	8.5	60.5	102.0	0.0	54.0	68.0	122.0
9	35.0	18.0	65.5	118.5	0.5	62.0	80.0	142.0
10	35.0	23.0	57.0	115.0	2.5	22.5	60.0	82.5
11	58.0	22.0	87.0	167.0	1.0	58.0	31.5	89.5
12	32.5	17.0	91.0	140.5	4.0	43.5	55.0	98.5
13	33.0	3.5	64.0	100.5	3.0	43.0	68.0	111.0
14	46.5	11.5	75.5	133.5	0.0	43.0	72.0	115.0
15	28.5	10.0	62.0	100.5	12.5	49.0	86.0	135.0

Problem Identification Model - Albuquerque

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
1	47.0	12.5	54.5	114.0	0.0	58.0	78.0	136.0
3	59.0	5.0	46.0	110.0	0.0	44.0	97.5	141.5
4	35.5	13.0	68.5	117.0	0.0	42.0	64.5	106.5
5	49.5	5.0	37.5	92.0	1.0	53.0	94.5	147.5
6	67.0	14.5	111.0	182.5	1.0	48.0	23.5	71.5
7	74.5	13.0	76.0	163.5	1.0	67.0	112.5	179.5
8	62.0	16.5	92.0	168.5	2.5	45.5	75.0	120.5
9	66.5	6.0	75.0	147.5	6.5	45.5	105.5	151.0
10	61.0	24.5	145.5	231.0	7.0	56.0	26.0	82.0
11	41.5	11.5	49.0	103.0	30.0	37.5	125.0	162.5
12	34.5	11.0	89.0	134.5	8.0	43.0	119.0	162.0
13	36.5	1.5	51.5	89.5	10.0	48.5	204.0	252.5
14	61.0	4.0	92.5	157.5	5.5	41.0	117.0	158.0
15	43.5	1.0	53.5	98.0	3.0	49.5	169.0	218.5

TABLE 34
(cont.)

ALBUQUERQUE VS. PHOENIX
COUNSELING BEHAVIOR BY SESSION

Relationship Model - Phoenix

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	17.5	6.5	18.0	42.0	0.5	32.0	117.0	149.0
3	34.0	4.0	57.5	94.5	2.5	42.0	64.0	102.0
4	16.0	5.0	36.0	57.0	0.5	32.0	29.5	61.5
5	17.0	6.5	51.0	74.5	2.0	23.5	41.0	64.5
6	13.5	5.5	45.0	64.0	0.0	32.5	59.5	92.0
7	37.0	10.0	45.5	92.5	0.0	16.0	50.5	66.5
8	53.5	5.5	113.0	172.0	0.0	28.5	67.5	96.0
9	26.5	4.5	55.0	86.0	0.0	20.0	77.0	97.0
10	3.5	1.5	8.0	13.0	0.0	14.5	61.0	75.5
11	14.0	4.0	26.5	44.5	0.0	38.5	131.0	169.5
12	10.5	1.5	17.0	29.0	0.0	10.0	50.0	60.0
13	18.0	1.0	34.5	53.5	0.0	43.0	137.5	180.5
14	15.5	2.5	50.5	68.5	0.0	17.5	114.5	132.0
15	15.0	1.0	25.5	41.5	0.0	22.0	134.0	156.0

Relationship Model - Albuquerque

SESSIONS	TASK	MODEL	ON TARGET	TOTAL MODEL INPUT	OFF TARGET	UH HUH	OTHER	TOTAL RAPPORT INPUT
2	47.5	10.0	61.0	118.5	0.0	24.5	64.0	88.5
3	42.5	15.5	54.0	112.0	1.0	29.0	46.5	75.5
4	41.0	0.5	24.0	65.5	0.0	15.0	19.5	34.5
5	34.0	1.0	39.5	74.5	0.0	27.0	121.0	148.0
6	32.0	16.0	48.0	96.0	1.0	45.0	74.0	119.0
7	27.5	4.5	24.5	56.5	0.0	25.5	59.0	84.5
8	34.0	4.0	52.5	90.5	1.0	36.0	106.0	142.0
9	22.5	12.0	32.5	67.0	0.5	30.0	94.5	124.5
10	10.0	1.0	11.5	22.5	0.0	12.0	30.5	42.5
11	11.5	2.0	23.0	36.5	0.0	16.0	93.5	109.5
12	28.0	1.0	57.0	86.0	0.0	73.0	103.0	176.0
13	18.0	3.5	13.0	34.5	0.0	5.0	70.5	75.5
14	33.0	1.5	57.5	90.0	0.0	17.0	111.0	128.0
15	34.0	1.5	55.0	90.5	0.0	15.5	58.5	74.0

In Phoenix there appears to be a tendency for quantity of model input to begin at a low level and increase to a peak between the sixth and eighth sessions. However, no clear trend is apparent for Albuquerque. In terms of absolute amount of input, Albuquerque exceeds Phoenix in all counselor categories where differences exist. For all models and sites, there is the expected inverse relationship between model input (task, modeling, selective responding) and the rapport input ("Uh Huh" and "Other").

Member Behavior: The mean quantity of member behavior for each category is presented in Table 35.

TABLE 35

ALBUQUERQUE AND PHOENIX

MEMBER BEHAVIOR BY SESSION

Interpersonal Model

			MEMBER-TO-MEMBER			
SESSION	OTHER	DESIRED BEHAVIOR	POSITIVE	NEGATIVE	NEUTRAL	TOTAL
2	35.7	72.0	2.5	0.2	1.5	4.2
3	52.7	79.0	3.0	0.0	7.7	10.7
4	135.0	61.2	3.7	1.0	32.7	37.4
5	208.5	46.5	0.0	0.0	13.2	13.2
6	126.5	83.2	5.0	5.0	15.5	25.5
7	126.5	69.2	2.5	1.2	16.5	20.2
8	204.5	39.2	0.7	1.2	23.2	25.1
9	157.0	34.0	6.2	1.7	26.2	34.1
10	223.7	45.5	2.2	0.5	24.7	27.4
11	232.2	50.2	2.2	6.2	43.5	51.9
12	149.7	54.7	6.7	0.0	25.7	32.4
13	154.0	24.0	1.7	0.2	35.7	37.6
14	231.0	16.7	1.2	0.0	19.0	20.0
15	175.5	27.2	1.7	0.5	18.5	20.7

TABLE 35
(cont.)

ALBUQUERQUE AND PHOENIX
MEMBER BEHAVIOR BY SESSION

Intrapersonal Model

			MEMBER-TO-MEMBER			
SESSION	OTHER	DESIRED BEHAVIOR	POSITIVE	NEGATIVE	NEUTRAL	TOTAL
2	306.7	70.0	5.7	17.5	36.5	59.7
3	244.7	81.0	1.7	11.7	30.7	44.1
4	335.5	44.2	1.5	1.7	20.7	23.9
5	251.2	56.0	1.0	2.5	22.7	26.2
6	284.5	34.7	1.0	2.0	19.5	22.5
7	201.7	60.0	1.2	1.0	14.5	16.7
8	251.5	32.7	1.0	2.7	13.2	16.9
9	293.0	30.7	0.7	3.7	17.2	21.6
10	312.0	16.5	0.0	1.2	14.0	15.2
11	358.7	26.0	0.2	1.5	14.2	15.9
12	326.0	16.2	0.5	0.5	22.0	23.0
13	321.7	35.2	0.5	3.2	19.7	23.4
14	265.0	46.2	1.0	5.0	16.7	22.7
15	267.7	31.2	1.2	5.0	18.7	24.9

Problem Identification Model

2	105.7	184.0	3.7	2.5	6.5	12.7
3	85.0	232.0	5.2	4.0	6.7	15.9
4	85.2	144.2	4.7	3.0	6.0	13.7
5	187.5	131.0	14.2	18.7	22.0	54.9
6	24.5	310.2	14.5	4.0	6.2	24.7
7	97.0	212.7	14.0	11.0	17.2	42.2
8	99.0	260.7	17.2	14.2	29.5	60.9
9	156.2	191.0	11.2	10.2	15.7	37.1
10	113.0	302.5	34.2	20.2	54.7	109.1
11	196.2	233.2	39.0	44.0	43.2	126.2
12	174.0	220.5	46.7	16.0	34.2	96.9
13	299.0	208.0	64.0	34.5	56.5	155.0
14	146.0	251.5	51.0	10.0	29.2	90.2
15	238.0	180.0	64.7	18.0	45.7	128.4

TABLE 35
(cont.)

ALBUQUERQUE AND PHOENIX

MEMBER BEHAVIOR BY SESSION

Perceptual Modification Model

SESSIONS	OTHER	DESIRED BEHAVIOR		MEMBER-TO-MEMBER			
		POSITIVE	NEGATIVE	POSITIVE	NEGATIVE	NEUTRAL	TOTAL
2	114.5	63.7	19.2	2.5	1.2	0.5	4.2
3	69.2	71.7	27.2	3.2	1.2	1.7	6.1
4	92.5	78.5	11.5	1.7	1.0	0.5	3.2
5	143.2	66.7	7.7	0.5	0.0	0.0	0.5
6	117.2	54.5	20.0	5.2	1.7	0.2	7.1
7	52.2	92.0	17.5	0.2	4.2	0.0	4.4
8	115.5	61.5	16.2	1.2	0.5	0.0	2.7
9	101.7	46.2	20.7	1.5	1.5	0.2	3.2
10	112.7	67.0	3.2	1.0	0.7	2.2	4.9
11	97.2	65.0	16.5	0.5	1.7	0.7	2.9
12	91.0	70.7	9.5	1.7	1.5	5.2	8.4
13	64.5	60.5	20.7	0.5	0.7	0.0	1.2
14	111.2	60.0	7.7	0.0	1.0	2.0	3.0
15	61.7	76.7	21.7	3.2	0.7	2.0	5.9

Relationship Model

SESSIONS	OTHER	DESIRED BEHAVIOR	MEMBER-TO-MEMBER			
			POSITIVE	NEGATIVE	NEUTRAL	TOTAL
2	83.2	60.2	3.2	0.0	1.0	4.2
3	61.0	65.2	2.5	0.5	1.5	4.5
4	21.2	83.5	8.7	0.5	7.2	16.4
5	63.2	75.7	5.7	5.0	4.5	15.2
6	72.5	74.5	3.0	0.5	7.0	10.5
7	47.5	67.7	1.2	1.0	0.5	2.7
8	84.5	147.7	5.2	12.7	6.0	23.9
9	82.7	57.5	0.5	0.2	2.7	3.2
10	38.5	28.7	0.5	0.2	0.7	1.4
11	109.7	42.2	1.5	0.0	17.5	19.0
12	85.7	51.2	1.2	1.5	4.5	7.2
13	92.2	67.5	1.7	1.0	3.0	5.7
14	143.5	68.5	1.2	1.5	19.0	21.7
15	121.2	48.0	1.7	0.5	23.5	25.7

DISCUSSION: The tendency for increased amounts of counselor input during the middle sessions apparently has effect upon the amounts of Desired Behavior statements on the part of members. The relationship, however, is not clear cut for all models. The models differ markedly in this regard.

There is an interesting trend for high amounts of initial neutral member-to-member responding in the Intrapersonal model which then decrease toward the end of the sessions. Conversely, there are low initial amounts of neutral member-to-member responding in the Interpersonal and Problem Identification models which then increases toward Session 15.

MEMBER TO MEMBER RESPONDING: A criteria of within and between counseling behavior regarded as being comparable to all models was the number of responses made by clients to one another within each counseling session. These member-to-member responses consisted of the number of tabulated frequencies of members who in direct response spoke directly to another.

An analysis of variance of total member-to-member responses for all sessions was performed comparing each of the five models. The results of this analysis are presented in Table 36.

TABLE 36

ALBUQUERQUE AND PHOENIX
MEMBER-TO-MEMBER RESPONDING

	INTER-PERSONAL	INTRA-PERSONAL	PERCEPTUAL MODIFICATION	PROBLEM I.D.	RELA-TIONSHIP
x	31.46	26.02	6.30	69.21	16.22
sd	31.25	19.47	5.13	70.45	21.51

F ratio 18.09 Probability <.001

Table 37 presents the totals for member-to-member responding for all models comparing the differences between sites.

TABLE 37

ALBUQUERQUE VS. PHOENIX
MEMBER-TO-MEMBER RESPONDING

	INTER-PERSONAL	INTRA-PERSONAL	PERCEPTUAL MODIFICATION	PROBLEM I.D.	RELATIONSHIP
Phoenix					
x	22.45	33.93	7.17	85.82	11.60
sd	22.70	17.91	5.96	78.38	14.89
Albuq.					
x	39.71	17.81	4.77	52.61	11.53
sd	35.95	17.81	2.89	58.26	20.68
F ratio	3.71	11.18	1.85	3.24	.93
probability	$< .10$	$< .01$	$< .25$	$< .10$	n.s.
df	(1.44)	(1.53)	(1.34)	(1.54)	(1.40)

All but the Relationship model were found to be significantly different between sites with the Phoenix site apparently gaining considerably more member-to-member responses. The Interpersonal model provided the one exception, wherein the Albuquerque site was significantly higher than was the Phoenix site. These findings address themselves to the issue of amount of preparation needed to undertake each of the counseling models. To the extent that member-to-member responses are an indicator of desired behavior on the part of the client, one is led to conclude that the more preparation and training one has in a particular counseling model, the more desirable this will be for client responses.

HILL INTERACTION (HIM-G): A second criteria of within and between counseling behavior regarded as being comparable between models were the content and work style categories of the Hill Interaction Matrix.

The data for this instrument was achieved through trends analysis of session by session ratings for each model. The sessions that were rated were Sessions 2, 6, 10, and 15. Three twenty (20) minute segments of each session, including the first, middle, and last 20 minutes, were rated. The data for both Phoenix and Albuquerque were broken down by site within populations. A discussion of F ratios for Phoenix Site I and Phoenix Site II is presented below.

The significance of the particular trend analyses is judged by an F ratio for trend. Significant F ratios were found for one counselor team in Phoenix exclusively. The F ratios and models are presented in Table 38.

TABLE 38
PHOENIX BY MODEL
HILL INTERACTION MATRIX (HIM-G) F RATIOS FOR TREND

PHOENIX I INTERPERSONAL	PHOENIX I INTRAPERSONAL	PHOENIX I PERCEPTUAL MODIFICATION	PHOENIX I RELATIONSHIP
F=2.50	F=5.80	F=0.88	F=1.62
$p < .10$	$p < .01$	$p < .25$	$p < .25$

The degrees of freedom are 3 and 45 for each F ratio.

It is to be noted that these were the only significant F ratios of interaction. There was no significant trend for the other three counselor teams and models.

TRENDS: The levels of interaction which reached significant F ratios were plotted by session across models, and again by models across sessions. Inspection of the graphs showed the following:

INTERPERSONAL MODEL: Most of the verbalization was Conventional in level B. There was a marked increase in Speculative in the 10th session, however this in turn decreased toward the end of counseling. There was some, but considered to be little Confrontive talk. This is perhaps consistent with the desired behavior of the model which called for exploration of behavior versus environmental demands.

INTRAPERSONAL MODEL: There was considerable concentration on self talk which was the form for the model. There are peaks in Conventional, Speculative, and Confrontive levels but no consistent pattern across sessions.

PERCEPTUAL MODIFICATION: Nearly all the verbalization was at the Conventional level which showed great differences in amount between sessions. There was comparatively little Assertive, Speculative, or Confrontive. This was consistent with the model's desired behavior and structure.

RELATIONSHIP MODEL: Again, the majority of the verbalization occurred at the Conventional level. There is however also much Speculation and Assertive talk about the group itself. This was highest in session 10 followed by decrease toward the end of the series of sessions.

DISCUSSION: Of the groups' focus upon Speculative and Assertive talk, only the Relationship model seemed involved with the topic of the group itself. Interpersonal and Intrapersonal groups used Speculative and Assertive levels but used them to search out other topics. Assertive interaction is often discussed as indicative of hostility.

Overall, it must be assumed that there was only mild "work style" movement among the groups. There were significant trends for only one team which suggests that for the other three teams the movement concept was unavailable, and even for the one team the movement must be considered mild. The interaction of the groups for the most part, took place within conventional styles which would appear to be less personally disruptive. The finding is important because of the attention the models gave to this very point. Counselor methods used techniques designed to facilitate a comfort-excitement ratio which would allow enough interest for groups to continue. Apparently the individual gains noted from other measures are available without strenuous personal disruptive or "therapy like" behaviors. The lack of gross work style movement is indicative of a more conventional or common place people group.

COUNSELOR EVALUATION OF MODELS

Three major issues present themselves regarding the counselors, and the practicality of utilizing the group counseling models in NYC centers. The first issue directs itself to the general area of counselor satisfaction, the assumption being that the counselor's attitude (satisfaction) toward a particular counseling approach will be an illusive but crucial determiner for client growth. The second issue concerns the amount of preparation needed for counselors who seek to utilize the models. The third issue concerns itself with the feasibility and efficiency of using co-counselors and more particularly, para-professionals as co-leaders.

In order to gain some insight into these issues, a seven point Likert-type questionnaire was designed and completed by the counselor and co-counselor following each counseling session. The questionnaire consisted of five general areas ranging from rapport with groups, interest in interaction with them, counselor satisfaction with group, satisfaction with the procedural models.

COUNSELOR SATISFACTION: Analysis of variance was performed on each of the five counselor ratings for both populations and each counseling model. Results are presented in Table 39.

TABLE 39

ALBUQUERQUE AND PHOENIX
COUNSELOR RATINGS OF SESSIONS

Analysis	ANOVA Item 1 Rapport	ANOVA Item 2 Grp.Interest	ANOVA Item 3 Interac'n of Members	ANOVA Item 4 Counselor Satisfaction	ANOVA Item 5 Satis'n. With Procedures
Model					
Interpersonal					
$\bar{x}$	4.31	4.26	4.69	4.67	3.81
sd	1.33	1.29	1.28	1.32	1,25
Intrapersonal					
$\bar{x}$	3.83	3.95	3.88	4.07	3.59
sd	1.54	1.45	1.43	1.40	1.15
Percep'l. Mod'n.					
$\bar{x}$	3.69	3.67	3.97	4.31	3.36
sd	1.54	1.49	1.44	1.72	.96
Problem I.D.					
$\bar{x}$	3.57	3.59	3.60	3.69	3.24
sd	1.68	1.64	1.64	1.61	1.24
Relationship					
$\bar{x}$	4.26	4.40	4.57	4.33	3.45
sd	1.62	1.75	1.67	1.87	1.29
F ratio	1.92	2.26	4.11	2.15	1.46
Probability	$<.10$	$<.10$	$<.01$	$<.10$	$<.25$

df 4.205
Note: The lower the rating, the greater the satisfaction.

From inspection of the table it is noted that all F ratios are significant at or beyond the .25 level. The Problem Identification model was rated more positive on all five areas of concern. The Intrapersonal and Perceptual Modification models received high ratings with regard to perceived client rapport, group interest, and interaction of members. In addition, the Intrapersonal Model received the second highest rating with regard to counselor satisfaction with a particular session. The Perceptual Modification model recieved the second highest rating on counselor satisfaction with procedures.

The Interpersonal model consistently received nearly the lowest ratings on all five areas. The Relationship model also tended to receive low ratings, except in terms of procedures, where the ratings were average with respect to the other four models.

CO-COUNSELOR SATISFACTION: A similar analysis of counseling session ratings was done on those ratings made by co-counselors. Results of this analysis of variance are reported in Table 40.

TABLE 40

ALBUQUERQUE AND PHOENIX CO-COUNSELOR RATINGS OF SESSIONS

Analysis	ANOVA Item 1 Rapport	ANOVA Item 2 Grp. Interest	ANOVA Item 3 Interact'n. of members	ANOVA Item 4 Counselor Satisfa'n	ANOVA Item 5 Satisfa'n. With Procedures
Model					
Interpersonal					
x	2.83	3.24	3.40	3.74	4.14
sd	1.30	1.16	1.21	1.10	1.22
Intrapersonal					
x	2.24	2.78	2.95	3.55	3.78
sd	1.24	1.48	1.38	1.42	1.63
Percep'l. Mod'n.					
x	3.50	3.59	3.81	4.24	4.52
sd	1.91	1.68	1.67	1.54	1.71
Problem I.D.					
x	3.24	3.38	3.64	3.64	3.83
sd	1.69	1.57	1.62	1.79	2.03
Relationship					
x	3.57	3.52	4.09	4.24	4.31
sd	1.38	1.47	1.65	1.53	1.54
F ratio	5.44	1.96	3.41	2.09	1.52
Probability	$<.01$	$<.10$	$<.05$	$<.10$	$<.25$
df (4.205)					

All of the F ratios were significant at or beyond the .25 level. The Intrapersonal counseling model clearly received the highest ratings from the co-counselors on all five areas, be it their perception of client behavior or their own satisfaction with the counseling session. The Interpersonal counseling model was judged to be second highest in terms of ratings received by co-counselors. The Problem Identification model received rather high ratings on items 4 and 5 which assessed counselor satisfaction with the particular session he had just completed and counselor satisfaction with procedures. The Perceptual Modification and the Relationship models were consistently judged or rated the lowest of the five counseling models.

COUNSELOR AND CO-COUNSELOR COMPARED: Ratings of the counselors were compared to co-counselors ratings for all models. The results of this analysis are presented in Table 41.

TABLE 41

ALBUQUERQUE AND PHOENIX
COUNSELOR AND CO-COUNSELOR RATINGS COMPARED

Analysis	ANOVA Rapport Ratings	ANOVA Group Interest	ANOVA Verbal Inter'n. With Members	ANOVA Counselor Satisfa'n.	ANOVA Counselor Satisfa'n. With Procedures
Counselor Ratings					
x	3.93	3.98	4.14	4.21	3.49
sd	1.56	1.55	1.54	1.61	1.19
Co-Counselor Ratings					
x	3.08	3.30	3.58	3.88	4.12
sd	1.59	1.50	1.55	1.51	1.66
F ratio	30.95	20.37	13.85	4.77	19.92
Probability	.001	.001	.001	.05	.001

df 1.418

Note: A high rating indicates low satisfaction.
A low rating indicates high satisfaction.

All of the analysis of variance of the rating means reached the .05 level of significance with four of the five reaching the .001 level. The findings clearly show that the co-counselors rated group rapport, group interest, and group interaction significantly higher than did the counselors. They also rated the overall satisfaction of their particular group higher than did the counselors, and rated the overall satisfaction of their particular group higher than did the counselors. The reverse finding is apparent in the overall satisfaction with procedures.

The ratings of counselors and co-counselors were compared between sites. Counselors in Albuquerque were selected from experienced school counselors and trained in model procedures for a period of three weeks. Counselors in Phoenix were members of the project staff with approximately six months of training and preparation time in the models. Co-counselors in both sites were accepted upon recommendation of the NYC program administration. Co-counselors from both sites received training of three weeks.

Tables 42 and 43 present the results of comparing ratings of the models for counselors and co-counselors between sites. For the counselors, the length of training time would appear as the crucial variable. For co-counselors the training time was constant at three weeks, but the general preparation background was different. Although they were considered as field coordinators with similar duties it both sites, the Albuquerque co-counselors both held Master's degrees and had some counseling experience.

Ten between site analyses of variance were performed, five for counselors and five for co-counselors for each model.

COUNSELORS: Table 42 presents counselor ratings.

TABLE 42

ALBUQUERQUE VS. PHOENIX
COUNSELOR RATINGS OF MODELS

Analysis	ANOVA Item #1 Rapport	ANOVA Item #2 Interest	ANOVA Item #3 Verbal Interaction	ANOVA Item #4 Satisfaction (General)	ANOVA Item #5 Satisfaction With Procedures
Model and Site					
Interpersonal					
Phoenix					
$\bar{x}$	3.71	3.78	4.21	4.12	4.14
sd	1.26	1.25	1.31	1.35	1.23
Albuq.					
$\bar{x}$	4.61	4.50	4.93	4.93	3.64
sd	1.28	1.26	1.21	1.24	1.25
F ratio	4.54	3.00	3.06	3.51	1.50
Probability	$<.05$	$<.10$	$<.10$	$<.10$	n.s.
Intrapersonal					
Phoenix					
$\bar{x}$	2.71	2.85	3.00	3.21	3.50
sd	1.14	1.03	1.11	1.05	.94
Albuq.					
$\bar{x}$	4.39	4.50	4.32	4.50	3.64
sd	1.42	1.32	1.39	1.37	1.25
F ratio	14.70	16.60	9.57	9.44	.14
Probability	$<.01$	$<.001$	$<.01$	$<.01$	n.s.
Perceptual Mod'n.					
Phoenix					
$\bar{x}$	2.50	2.64	3.00	3.36	3.28
sd	.76	.75	.78	.93	.91
Albuq.					
$\bar{x}$	4.28	4.18	4.46	4.78	3.39
sd	1.49	1.51	1.45	1.83	.99
F ratio	17.71	12.70	12.32	7.47	.11
Probability	$<.001$	$<.01$	$<.01$	$<.01$	n.s.

TABLE 42
(cont.)

Problem I.D.					
Phoenix					
$\bar{x}$	2.07	2.07	2.28	2.36	2.71
sd	.83	.73	1.07	1.21	1.33
Albuq.					
$\bar{x}$	4.32	4.36	4.25	4.36	3.50
sd	1.49	1.42	1.48	1.36	1.14
F ratio	27.37	31.79	19.44	21.44	3.98
Probability	$<.001$	$<.001$	$<.001$	$<.001$	$<.01$
Relationship					
Phoenix					
$\bar{x}$	4.85	4.86	4.86	4.78	4.36
sd	1.23	1.23	1.29	1.25	1.15
Albuq.					
$\bar{x}$	3.96	4.18	4.43	4.11	3.00
sd	1.73	1.94	1.83	2.10	1.12
F ratio	2.95	1.41	.61	1.23	13.43
Probability	$<.10$	n.s.	n.s.	n.s.	$<.01$

A higher rating indicates less satisfaction.

CO-COUNSELORS: Table 43 presents the results of analysis of variance of co-counselor ratings by model between sites.

TABLE 43
ALBUQUERQUE VS. PHOENIX
CO-COUNSELOR RATINGS OF MODELS

Analysis	ANOVA Item #1 Rapport	ANOVA Item #2 Interest	ANOVA Item #3 Verbal Interaction	ANOVA Item #4 Satisfact'n (Gen'l)	ANOVA Item #5 Satisfact'n With Procedures
Interpersonal					
Phoenix					
x	2.28	3.07	3.50	3.50	3.78
sd	1.27	1.14	1.29	1.09	.97
Albuq.					
x	3.11	3.32	3.36	3.86	4.32
sd	1.26	1.18	1.19	1.11	1.31
F ratio	3.96	.42	.13	.97	1.83
Probability	<.10	n.s.	n.s.	n.s.	n.s.
Intrapersonal					
Phoenix					
x	1.36	1.86	2.28	2.71	2.36
sd	.74	1.29	1.14	1.07	.49
Albuq.					
x	2.68	3.25	3.28	3.96	4.50
sd	1.22	1.35	1.38	1.40	1.53
F ratio	13.78	10.20	5.44	8.60	25.89
Probability	<.01	<.01	<.05	<.01	<.001
Perceptual Modif'n					
Phoenix					
x	1.57	2.00	2.14	3.28	3.50
sd	.76	.70	.95	1.20	1.50
Albuq.					
x	4.46	4.39	4.64	4.71	5.03
sd		1.45	1.28	1.48	1.59
F ratio	43.16	34.10	41.56	9.69	8.94
Probability	<.001	<.001	<.001	<.01	<.01

TABLE 43
(cont.)

Problem I.D.					
Phoenix					
$\overline{x}$	1.71	2.14	2.28	1.93	1.85
sd	.73	.53	.82	.61	1.03
Albuq.					
x	4.00	4.00	4.32	4.50	4.82
sd	1.51	1.56	1.49	1.55	1.65
F ratio	28.32	18.47	22.43	35.30	37.35
Probability	<.001	<.001	<.001	<.001	<.001
Relationship					
Phoenix					
x	4.14	4.00	5.00	4.78	4.71
sd	1.30	.96	1.57	1.19	1.07
Albuq.					
x	3.28	3.28	3.64	3.96	4.12
sd	1.35	1.63	1.52	1.62	1.70
F ratio	3.84	2.27	7.28	2.82	1.47
Probability	<.10	n.s.	<.05	n.s.	n.s.

Note: A high rating indicates less satisfaction.

DISCUSSION: The Intrapersonal model was seen rather consistently by both the counselor and co-counselor as generating the greatest rapport, group interest, interaction and counselor co-counselor satisfaction with procedures. However, some rather marked differences appear with regard to comparison of counselor to counselor perceptions of their counseling sessions on the other four models. The counselors tended to view the Problem Identification and Perceptual Modification models as generating considerable group interest, rapport, and interaction, while the co-counselors viewed the Interpersonal model as doing that more than either the Perceptual Modification or Problem Identification models. The co-counselors, however, joined the counselors in terms of their own satisfaction with the Problem Identification model. Co-counselors were at variance with the counselors in that they did not see the Perceptual Modification model as being satisfying either in terms of procedures or client behavior. Counselors reported satisfaction with the basic procedures of the Relationship model.

Differences are striking between sites in terms of degree of group rapport, interest, interaction, and satisfaction. In all cases, with the obvious exception of the Relationship model, Phoenix counselors and co-counselors rated their groups better in these regards, and the trend for the Relationship model is in the reverse direction. This is consistent with the general lack of results encountered with this model in the Phoenix site.

For the counselors' ratings at least, there is little consistency in satisfaction with model procedures. Phoenix was more satisfied with the Problem Identification model, Albuquerque more satisfied with the Relationship model.

SUMMARY

There was a high degree of within model consistency between time segments and especially so for counselor input. The counselors behavior was much the same from beginning to ending of sessions for a particular model.

Counselor input varied in quantity between models with problem identification using more "target" input than the other models. There was also a profound difference in the type of counselor input between models and between level of training of the counselor. The more intensively trained counselors used more modeling, uh huh, and target selective responding. The less intensively trained counselors used greater total amounts of input with heavy concentration on task prescriptions. Input quantities, however, varied more by the model variable than the training variable. Problem Identification had the most. Perceptual Modification the least.

Member responses during sessions were also noted to be consistent from beginning to ending of sessions. Two models, however, showed more increase that the others in member desired behavior statements as the session progressed. There was some reduction in "other" statements and increase in desired behavior during the last portion of sessions. The two hour period seemed best used by the perceptual modification and the problem identification models.

Differences between progressive sessions are less clear. There is some tendency for increased amounts of counselor input and member response to occur during the middle number of sessions. The models, however, differ in this regard and the tables show varying trends for the various categories. In the member-to-member responding category, the trend appears more clear. For the Intrapersonal model, there is decrease toward the end of sessions. For Interpersonal and Problem Identification there seems to be steady increase through session 15.

The total quantity of member-to-member response statements were tabulated for comparison between models. Problem Identification was highest and perceptual modification the lowest in this regard. This factor was also compared between sites where the counselor training and enrollee variable might have been important. In Phoenix, the counselors were more intensively trained and the enrollees were in the out of school program. There was more member-to-member responding in Phoenix for all models except Interpersonal.

The Hill Interaction Matrix trends as scored by the trained audio tape raters, reached significant F ratios for only one of the four counselor teams. For this team the Interpersonal and Intrapersonal models progressed to the greater depth of interaction, the Confrontative-Integration (E) level. All other models showed the greatest amount of interaction in the Socialization and Speculative-exploratory levels. The relationship model produced the least amount of across session interaction. The majority of the counseling, however, revealed no significant trend across sessions on this instrument.

The counselors' self report of satisfaction ratings for the models varied in terms of whether he was a counselor or co-counselor, and whether or not he was intensively trained in the use of the models. Counselors gave the highest rating to Problem Identification, then Perceptual Modification with low rating for Interpersonal. Co-counselors rated the Intrapersonal model highest, also rated Problem Identification high, but gave Perceptual Modification low ratings.

Phoenix counselors rated the verbal interaction and satisfaction with procedures highest for Relationship. Albuquerque counselors saw Problem Identification best in observed interaction but Perceptual Modification having the most satisfying procedures.

PART V

IN RETROSPECT

When looking at the research as a whole, severalinferences become apparent and perhaps important for consideration. Generalizations have been made concerning the counseling, the overall process, and the various models. Also, recommendations are presented for NYC Counseling and for further research. The more detailed discussions of specific findings can be noted in Parts III and IV where discussion is presented following the data presentation for each indicator variable.

For most research, and especially for exploratory research, decisions are made which somehow look different in retrospect. We have taken the luxury of some "Monday Quarter Backing" in hopes that the reader may profit from our less adequate decisions.

IF WE HAD IT TO DO OVER AGAIN

There has been little formal research reported that is specifically related to group counseling with poverty youth. An exploratory study of this type was needed to define problems and find researchable variables. Thus, a major purpose of the study was to look for new variables. Such a study is plagued from the start by the many problems that accompany counseling research, but also the many more esoteric problems peculiar to working with the jobless and school dropout. The number of identifiable variables which should be controlled, but which unfortunately for practical reasons cannot be, are numerous. There are, therefore, still many unanswered questions. The counseling models were carefully designed, but the evaluation of their utility in the reality of the life-like setting was difficult.

We used the objectives of expanding perception (meaning), and increased communication. They met the basic requirements of specificity and operationalism, but we wonder if the instruments taped enough of what was there and we think not; we needed better instruments.

The study did show that perception (meaning) was expanded or increased. There was evidence for this in the examination of the Expanded Perception Test, and also in the Enrollee Attitude Questionnaire and the Tennessee Self Concept Test. There was also fairly clear evidence that direct member-to-member communication improved.

The Hill Interaction Matrix (HIMG) showed some pattern of improvement (intensity) between Session 2 and Session 6. But, this instrument, brought significant trends for one counselor team only. It seems obvious that three-fourths of the interaction failed to be adequately described by this instrument.

The analysis of the member-to-member responses by tape raters within each counseling model clearly suggests that some models can greatly increase this amount of communication. But, the quality of response is yet to be described. Our broad categories of positive, negative, and neutral were not very usable.

We hypothesized that as NYC enrollees improved in communication abilities through expanded perception of meanings, they would behave more appropriately in school and work situations. We should have followed enrollee behaviors for a longer period of time after counseling. The behavioral data that was collected such as job absenteeism, school grades, police arrests, etc., were observed for only two timed sequences. This should have continued for at least two more equal time periods. The continued time period analyses would have permitted a more complete testing of the basic proposed theory, namely that as attitude and perceptual changes occur then behavioral changes will also be observed. It is probably fair to say that sufficient time was not given to fully evaluate the group counseling experiences in terms of behavior following counseling.

One of the major handicaps of the project, was the inability to identify "good" standardized criterion instruments. Several of the enrollees evidenced difficulty in reading the standardized questionnaires. In addition to the difficulty in reading, we suspect that enrollees tended to respond in a different frame of reference than the population on whom the tests were standardized. The IPAT Anxiety Scale was designed to yield a score indicating generalized anxiety. The subjects were administered the IPAT at the beginning and at the end of the treatment sessions. It is quite possible that there was, thus, a "testing" effect which was itself anxiety provoking, and the results may be shrouded or distorted as a result.

The Tennessee Self Concept Scale was less culturally bound to middle class values, and there was some evidence that there was increased variability in the report of self and environmental concepts by the change in the tests. (V score). But, we needed better testing in this regard. The finding is potentially very important since it suggests a movement away from positive-self and negative-environment rigidity sets. We should have also used scales for measuring prejudice, dogmatism, and flexibility.

There are at least three procedures where we could have improved with respect to teacher and work supervisor attitude testing. Much more orientation and preparation should be given to teachers and work supervisors with regard to the purposes and goals of a research project such as this. It appears likely that the teachers and supervisors were not well enough prepared to make specific evaluations of the students. More specific questions should have been asked which relate directly to the project purposes. Questions were not clear, for example, as to whether the enrollee now expresses himself more directly in the classroom and work situation. There was also "halo" effect in the scales we gave. All evaluations received a rating of 3 or 4 on the 1 to 5 scales rather than full use of the scale. There may not have been enough variance in the attitudes being polled.

The Enrollee Attitude Questionnaires could have been improved by developing more subtle dichotomies which would include areas which would include areas of meaning other than just the evaluative (like-dislike) dimension. Various factor analysis studies of meaning suggest there are other dimensions of meaning which may not have been assessed.

The Expanded Perception Test, achieved significant finding both between and within counseling models. The major concept items of authority, self, and work were closely aligned to the overall objectives of the project. The factor analysis did show that the word clusters under each major concept were directly related to that concept, but the clusters could have been tighter in this regard. Refinement of the test would have probably insured this. The Expanded Perception Test had an obvious advantage over the other self-assessment instruments in that the enrollees did not have to write or read in order to respond. They merely give as many associations as possible in response to the stimulus words. This technique does appear promising for groups where one might suspect a reading, or educational, or cultural deficiency.

ABOUT THE COUNSELING

1. Attendance was good for the in-school, Albuquerque population. Even though counseling sessions were held after school hours, on the average, less than one person was absent per group meeting. The two populations were very different in this regard. In Phoenix (out-of-school), the number absent averaged between two and four persons each session. This varied, however, among models and was less for the last four weeks of counseling.

2. The counselors were asked to closely observe and carefully screen for members with insufficient tolerance for the group experience. Of the total population, 243 (with adds), only three (3) were denied group membership. They were referred to individual counseling. With a population of this size, one would expect to find a greater percentage in need of psychiatric care. Perhaps some of those who dropped from the Phoenix program were in need of individual help but went unidentified in the early stages of group counseling, but the normal termination rate of the program was probably accountable for this. For the most part, the groups were surprisingly supportive in the face of some strong neurotic, near M-R, potentially very hostile, and highly dependent behavior.

3. Extensive mutually supportive rapport was established between counselors and group members. Counselors reported gratifying relationships and verbal rewards from enrollees. As the two month period progressed, counselors became identified with enrollees, total groups and problem situations. Mutual support, as the weeks went on, seemed to "cut across" variables of race, economic condition, age, value system, and personal problems. This was perhaps the most "heart warming" of all subjective

observations as they were reported from the counselor-control meetings and the tape analysis of sessions. Frequently, the tapes would show expression of new insights and the verbalizing of new humanistic concerns under the supportive conditions of the group.

4. The counselor team (professional and paraprofessional) idea seemed to work well. There was some strain at first, but increased support and interdependency as the weeks progressed. Prior to counseling, some time was spent in counselor grouping and exchange, thus uncovering potential conflicts and inhibited expressions, while the members of the group (other teams) worked to help resolve them. This preparation was perhaps important and a necessary part of the pretraining for counselor teams. When motivation is high, this can be accomplished rather quickly just prior to the counseling time.

5. The counselors were admittedly fatigued with two months and two sessions each day, of a different model, but there is no question that groups of this population can work together over this period of time. There were 20 groups, 32 contact hours for each group, and 8 counselors involved. There were no counselor absences, and many enrollees expressed desire to continue. Some of the groups have continued to meet with NYC or Grass Roots personnel. Enrollee tolerance seemed to increase rather than decrease. The group counseling models can be implemented and extended over a period of time.

6. The Problem Identification, Perceptual Modification, and Intra-personal models appeared as most promising. The counselors liked them and were able to consistently develop target input for the model. Enrollees gained in attitude, expanded perception, and member-to-member interaction. But, regardless of the model, there appears to be positive attitudinal effects and especially so for members with less identification or associations with other institutions such as public school. School and general society dropouts are often observed with less than ideal positive attitudes toward self and environmental functions. The counseling is apparently useful in this regard.

7. Overall, the results of the self concept testing indicated that the population was well within the normalcy range. Enrollees see themselves positively, but, they tend to show anger, give rejection, and hold negative feelings toward the general environment. This was noted by their comments during counseling and also for the evaluation session following counseling. The change noted in variability (V score on the Tennessee Self Concept) following counseling indicated a change in the consistency of perceptions for self and others. The perceptions apparently became less "locked" and less directed by stereo-typing alone. Enrollees no longer perceived on their environment and self in such a "black and white" way.

8. Expanded perception or at least the expanded facility for language "givens" in expression is apparently available through model group counseling. More gains are noted from the in-school enrollees however. The use of counseling for this gain may be more efficient when group members are already in possession of a minimum facility. There are many questions of course as to what is really involved in this outcome. Whether it is perception, word inventory, or motivation to use the inventory are perhaps only a few unknowns and more work is needed in both test refinement and variable control. However, further research does appear promising in this area.

9. It seems quite obvious that counseling attention does "spill over" to general program identity, and the yield is positive for actual behavior change. There are changes in areas of program termination, job attendance, and reductions in delinquent behavior. Often, when there are insufficient counselors available for all clients under a particular institutional identity, there are tempting decisions to "water down" counseling to brief parent-type contacts for all rather than the more appropriately thorough counseling for the few. The "Hawthorne" effect seems available in this regard. It does yield beneficial effects and they can be expected. Where only limited counselor time is available, the concept can be utilized to enrollee benefit.

10. The paraprofessional and professional can work together for intense and extended periods under the structure of model group counseling. They evaluate very differently, even diversely, but perhaps utilize the model structure for equating differences. The counselor's mutual supportive behaviors and acceptance of roles appeared to increase rather than decrease throughout the months. The method is perhaps a good way to contribute to paraprofessional training. The professional's "fear" of interference, and the paraprofessional's worry over encroachment is apparently less than the supportive contributions they are able to supply each other.

11. The training of counselors in the procedures and structure for model group counseling is perhaps not as easily gained as earlier thought. Three weeks, however intense, is not adequate. A more thorough knowledge, practice, and overall grounding for the "target" input is necessary.

12. The group counseling models do increase the quantity of direct member-to-member response. Human interaction through the media of verbal exchange is often considered as remedial for the "left out," or "pushed out" feeling that accompanies much of economic and academic poverty. This is an additional concern socially because the "left out" feeling is so often associated with anti-social "acting out" and the reactive, rather than more freely, selecting of group memberships. The model counseling is perhaps of benefit here with the more ultimate yield of increased creative, and independent socializing and decision-making citizens.

ABOUT THE MODELS

13. There appears to be little doubt in the examination-comparison of the five counseling models, as well as the two control groups, that the Problem Identification model was in many ways superior to the other counseling models. The Perceptual Modification model and the Intrapersonal model are also quite productive. All three of these models have a rather heavy structure, though the structure is different and for different reasons. The Problem Identification model and the Perceptual Modification model could be typified as possessing a rather highly organized set of behaviors which the counselor can readily learn and implement. For these reasons, a suggestion for implementing the models would argue that minimally trained counselors, should first employ the Problem Identification or the Perceptual Modification models. It seems that both experienced and inexperienced counselors are reasonably successful in utilizing these two models, and the gains made by enrollees are quite high.

14. The Intrapersonal model has a structure associated with it too, though this structure was more in keeping with advanced counseling and psychotherapy, particularly of the "non-directive" or "Rogerian" flavor. The model did not seem to be particularly biased in terms of application to any particular enrollee group, in-school or out-of-school, yet it does appear that this particular model requires considerably more sophistication and background on the part of the counselors for successful implementation. For counselors well-trained and particularly well versed in the assumptions of Rogerian theory, this model appears desirable.

15. The Interpersonal model places a rather heavy emphasis upon rational or logical thinking. It does not emphasize the way a person feels, but rather the way he thinks about himself and his relationship to his environment. It would appear that the less trained counselor can use this model best. The co-counselors who had less preparation, contrasted to the more formally trained counselors, felt more at home with this particular approach. When counselors with minimal training are the only available counselors, there should be special consideration for the Interpersonal model.

16. The Relationship model, which places a rather heavy focus upon self disclosure and "completed messages" as communications between members, did not fare as well as the other four models. This approach is more generally associated with the newer "encounter" approaches, and places a rather strong emphasis upon direct confrontation, member-to-member. From this study, it would appear that adolescents from lower socio-economic groups who have a history of submissive, and passive aggressive reaction to authority and to people in general, are less prepared for this particular counseling approach. The Relationship model appears to be more successfully

utilized with middle and upper social and economic class clients. The general verbal ability of the clients may be a variable associated with these differences.

17. Moderate gains were experienced by the enrollees who were assigned to the "treatment" Control Group I. Rather than attending the counseling sessions, these particular enrollees spent a comparable period of time in self study and leisure reading-time activities. It is not possible, at this point, to say whether the reading and study activity or the general attention given the enrollees (Hawthorne effect) accounted for the gains. Further research will be needed to resolve this issue. In the meantime, it would seem quite appropriate to implement supervised study as well as leisure time reading in small groups.

FOR FURTHER RESEARCH

One of the major drawbacks involved in analyzing the within session verbal behavior of counselors and clients came from the inability to specifically pinpoint the time relationship between the particular behaviors. While it was possible to find the correlation of the frequency of certain counselor behaviors (tasking, modeling, selective responding), and certain member behaviors (desired behavior, member-to-member responses), it was not possible to specifically identify what immediately preceded or followed each of these behaviors. Further research is needed in this regard.

From the data generated in this study, it appears that a comparison of the beginning and ending time segments of each counseling session would be very fruitful. The finding, that counselor verbal behavior is quite similar within one session from beginning to end, and member behavior is not, suggests that more careful attention ought to be given to the issue of amount of time utilized in a counseling session. The counseling models were employed for approximately two hours each session. Further research should investigate the potential advisability of having the session vary in length from, for example one to three hours.

Data from this study indicated that Expanded Perception (EP) tended to be associated with conditions which generated member-to-member (MM) responses. This is one way, at least, to define increased communication skill. In addition, both high (EP) and high (MM) responding were related to groups which exhibited a reduced on-the-job absenteeism rate. Other desirable social behaviors and attitudes, while not highly significant, also appear to be related to an increase in (EP). Questions regarding additional social relevance are now appropriate. If perception (as defined) can be expanded, what is its effect upon other desirable and undesirable behaviors. Additional study could be designed to manipulate expanded perception as an independent variable. Various desirable social behaviors could then be observed as dependent variables.

Overall, the Problem Identification (PI) and Perceptual Modification (PM) models appeared to be most effective in producing (EP). The Intrapersonal model (IP) on the other hand, tended to generate the most desirable attitudes. While the generalizations are far from conclusive, the results developed enough information to make the next steps rather implicit. Since each of the models applied the same general procedural input, experiments should be developed to study in greater detail, the significance of each method used across models on (EP) and attitude change.

A major objective of the present project was to gain experience in the counseling methods, defined as "task prescription," "modeling," "selective responding," "other," and "uh huh" statements. Research is now needed which will ferret out which of these methods have greatest impact on Desired Behaviors. The procedures can now be behaviorally defined and studied as independent variables, both singularly and in combination. A study could be developed to further investigate the effect of each variable. "Modeling," "selective responding," "other" statements and "uh huh" could become the independent variable with two levels each and the interaction effects could thus be appraised, with a separate analyses performed for each of the dependent variables.

There were differences noted for "complete messages" and "member-to-member" responding. Communication skills as identified by "complete messages," i. e., the linking of perception, feeling and motive (because), was structured and reinforced in the Relationship model. This model was consistently less efficient in terms of the outcomes studied. The communication skills, defined as direct member-to-member responding, however, were noticeably improved by the (PI), (INTRA) and (PM) models. There seemed to be little relationship between "complete messages" and the more direct responding of member-to-member. The "complete messages" focus may either be too difficult for groups to deal with, or it may, in fact, be too high a level of communication practice for immediate generalization. Some research is also needed to observe for later effects of this kind of practice. The "complete messages" behavior may be related to another level and time sequence in communication. Basic research is needed in this area.

A wide variety of concepts and techniques are presently being demonstrated in groups. One such focus that utilizes a variety of techniques is the encounter group. One major focus for encounter-type groups is the increased self awareness or sensitivity through Bi-polar, evaluations by members. The concept uses a feedback process where, as a member experiences a negative evaluation, he is also encouraged to freely experience positive, the other half of the total feeling. The assumption is that he thus gains change and expansion of perceptual quality because both extremes of feelings are experienced.

The Bi-polar disclosure and feedback concept was developed through a "feedback chair" technique in the Relationship model. The model did not appear to bring outstanding gains in (EP), attitude, or communication skills. Either the technique was insufficient, the outcomes inappropriately appraised, or the Bi-polar concept is less important than previously thought to the total sensitivity concept.

On the other hand when Role Playing and Role Switching techniques were coupled with the projected "alter" ego and applied to the problem identification model, there were a number of significant gains. The alter ego concept has similarity to the component parts projection concept of Gestalt therapy widely used in some sensitivity groups. The concepts sometimes used in encounter groups which combine body awareness, body expression and verbal encounter, were not tested by the models in this study. Additional basic research is thus needed with respect to the various encounter (Sensitivity) group procedures and their related outcomes.

The problem (ID) model seemed to achieve several of the predicted desirable gains, while the Interpersonal model lacked in this regard. There were two basic differences between the models. In the (PI) model, problem situations were role played and role switched, which brought emphasis upon the individual's projection as reality. The Interpersonal model, however, used reality as an agreed upon social context. That is, there was no role playing or switching, and the process was purely cognitive exchange and descriptions of a cultural, accepted, reality context. Both models, however, focused upon environmental expectation. A second basic difference was the (PI) model's liberal doses of group to individual attention, concern, support and group identification with a presenters problem. The Interpersonal model did not structure for this.

It is a question as to which of the two variables does, in fact, account for the efficiency of the model. Since both variables are combined in the present (PI) model, it would be of interest to study the effects separately in order to determine which procedure is more related to the desired behavioral change, or whether the combined effect is in fact more important.

It was apparent in this research that there were differences in counselor behavior between the two population sites, even though the counselors performed the same procedures. While some of these counselor differences may have been generated by the fact that the subjects were different, it would appear that for most of the models, the counselor behavior differences were also important. In the Intrapersonal model, for example, counselor procedures were significantly different on six different counselor behaviors. Yet, the counselor at both sites rated this model as their preference and thus confident that they were performing the procedures adequately. The counselor training variable needs additional study.

NYC (poverty) youth is of course not a discrete population. There are other variables involved such as counselor sex, client sex, socio-economic level, ethnic group, age, schooling, etc. There is also the matter of verbal readiness or readiness for communication skill and (EP) improvement. These must be developed as independent variables for further study. Also, there is the more obvious question of what differences exist between poverty and economic affluence.

The instruments for observing criteria change in these areas need further refinement, especially the (EP) test. The concept does appear as significant and dependent upon counselor intervention style. Even in its primitive form, the test did produce some variation and associated changes.

Thus far, the dependent variables identified have been those deemed "Desirable." It would be important to identify and measure behaviors that may accompany desirable outcomes. Are there undesirable effects from expanded perception and communicative skill? If there is an increase in agressiveness for example, what are the tolerance limits for self and other?

While the present project attended somewhat to follow-up effects, the exploratory nature of the models, procedures, and instrumentation were such that this aspect of the study was not a major objective. As the ingredients appear more refined, extended follow-up data becomes more important. Social gain is judged by more lasting effects with respect to human values and creative socialization. Certainly, a major social value is creative and productive group membership. A longer term follow-up may reveal expanded perception to be generalizable to this kind of socialization process.

RECOMMENDATIONS FOR NYC COUNSELING

Counseling services in NYC programs could be improved considerably. Services, at present, are short of adequate. Counselors, for the most part, are untrained. There is a void of professional direction. Counseling procedures seem unrelated to enrollee growth. In-service preparation and professional improvement of para professionals is scattered or non-existent. Purposes for counseling seem unclear. Procedures appear related to administration support, rather than enrollee personal growth. There is urgent need to establish a professional counseling service with clear goals for enrollee improvement, a focus for the counseling procedures consistent to these goals, and a self sustaining program giving direction to continuing professional improvement of the counselors. The following suggestions based upon our studies are noted for consideration.

1. Group Counseling with marginal interviewing is the recommended media for enrollee personal growth. Counseling sessions should be required along with work training as the employability-experience program for the NYC.

2. Marginal interviewing should be available throughout the counseling period with the focus for these interviews being --"How can we help you to discuss this in the group?" The "screening-out" of enrollees for extended individual counseling should be based first upon enrollee tolerance for the group.

3. Advising and administrative contacts should be on-going as needed, and conducted by administrative personnel rather than those assigned to the group activity. The counseling and advising should be separate functions.

4. Personal growth in communication skill should become the basic goal for the counseling. This skill appears to be related to employability (social) behaviors. As enrollees improve in their facility to communicate with each other on topics of self, work, and authority, they tend to feel more comfortable in these areas. The personal support from the group interaction tends to yield increased self-confidence, and reduced defensiveness during employer contacts. Practice in member-to-member listening and direct responding tends to improve attitudes and verbal skills which are directly related to improved employability behaviors.

5. Expanded perception and meanings seem to be available from the professional attention by counselors during group interaction. The relationship between this facility and employability behaviors is still unclear, but there appears to be some relevant association between the two. The facility is noted as a result of guided group interaction.

6. Paraprofessionals (coordinators, aides, coaches) should be recruited and trained as co-leaders for groups. The team approach appears to be a functional way to utilize their unique facilities, provide professional supervision for their work, and facilitate their internship training.

7. Counselors should be employed to conduct the groups. The normal master degree education in counseling seems to be adequate for basic preparation. Skill training in the models is then available from a relatively short training period. The basic preparation needed for model skill training, however, is as yet unclear. Various basic preparations should be tried and observed as potential sources.

8. Counselors and co-counselors should receive their model skill training concurrently as a team. Problem Identification, Perceptual Modification, and Interpersonal appear as most relevant for beginning teams. Gains have been noted for these, and the skill training is more easily acquired. Counselor attitudes and reported satisfaction is apparent for these models.

9. One or two teams should be selected from each program and given the model skill training. This could be accomplished by providing an orientation workshop for counselors and administrators in the program. The teams could then be selected on the basis of counselor interest and motivation and by mutual agreement of counselors, administrators and trainer. The selected team(s) could then begin the model counseling in their own program, and gradually as they acquire experience, serve as the source for continuing in-service training of other counselors and teams in the program.

10. There should be continued research on the models with additional criterion instruments tried and additional refinement of method and technique. The teams trained for each program could do this with the help of a central research center which could be established in order to develope new variables, promote their research, and bring direction and technical help for the data processing and reporting.

11. Frequent meetings and workshops should be established for the dissemination and orientation of new findings from the various studies. There is considerable lack of fact in the counseling literature at present concerning counseling with this population. The direct "research to workshop" information process would eliminate a good deal of the "time-lag" which normally occurs from publication to classroom to program implementation. The critical need warrants the attempt to find a more efficient process.

PART VI

CONCEPTS IN BEHAVIORAL AND EXISTENTIAL COUNSELING

In the effort to develop models for group counseling, the literature was searched for studies and current concepts in behavioral and existential psychology. The models and methods which were defined, researched, and presented in this report were developed out of these concepts. The reader may wish to refer to these pages for further understanding of the rationale for models and model dimensions.

The concepts are presented in two major divisions of Behavioral and Existential. The counselors' model input drew heavily upon Behavioral Concepts for "Target" techniques, and upon Existential Concepts for "Other-Rapport" techniques. It was the potential efficiency for counseling from a co-existence of these techniques that became a basic function of the research.

COUNSELING AND BEHAVIORISM

To many in the field of counseling and psychotherapy today, the group as a medium and the technology of learning theory as a methodology are interesting and compelling phenomena. It is relatively rare, however, to find individuals who are interested in both. In spite of this rarity, there is a considerable body of research in the literature which combines the two. A considerable number of such studies and discussions will be mentioned in the following chapter, however, this treatment is not intended to be exhaustive.

Counseling can be viewed as the delineation and implementation of the necessary conditions of behavioral change in clients. The underlying assumption is that human behavior is modifiable through the use of psychological procedures. It is not the purpose of this discussion to point to a particular theory or model of counseling or psychotherapy as the most effective methodology. This would be tantamount to prescribing the "effective procedure," or the "necessary and sufficient" condition. Rather than venturing the idea that there is a therapeutic approach which constitutes the panacea for the ills of mankind, we ascribe to the position stated so well by Ford and Urban (1965): "To ask whether therapy is effective is a misleading question. A more useful question to ask is: What kinds of treatment procedures will produce what kind of behavioral changes in what kinds of individuals?"

Our position in this paper is that certain behaviors can be modified by identifiable psychological means and we will discuss some of the means that are effective in producing specified changes in groups.

Counseling theorists representing every position will agree behavior is lawful, and the goal of counseling is to effect behavior. There also seems to be common agreement (where there is no organic involvement) that the crucial behavior of humans is learned. The problem is to define and utilize the dimensions of the counseling situation that determine the lawful relationship between the behavior, methodology, and procedures of the counselor as the independent variable, and the behavior of the client(s) as a dependent variable.

Behavior is learned in an interpersonal process, beginning in a family that is inextricably imbedded in a culture or sub-culture. This provides us with a program of characteristics which each of us acquires in the process of growing up in a family which represents a sub-culture.

While the attitudes, values, overt motor and verbal behavior may be appropriate and functional to a previous situation such as a family or a sub-culture, they may be, in part or in total, non-functional and self-defeating in a different situation to which the individual aspires.

The group counseling process provides a situation where a counselor(s) can intervene at appropriate times in such a way as to generate new responses, strengthen and/or expand other responses, and decrease or extinguish the probability of the occurrence of still others in terms of frequency and/or topography. In this contrived social or quasi-social situation, the individual gets a chance to practice new behavior, learn ways of expressing his feelings that are effective to a given situation, and learn ways to achieve and maintain an adequate self-esteem. He can learn of his needs and the appropriate behavior to achieve their satisfaction.

Behavior modification methods, in psychotherapy or counseling, are the establishment of conditions under which some prior designated change in responses or behavior can occur and can be measured. A major aspect of this process is to: 1) define the behavior and the interrelated responses which constitute the behavior, and 2) determine what experiences will be effective in modifying the behavior toward desirable ends. When this is done, contingencies and reinforcers can be delineated. Thus, the behavior, the response, or the appropriateness of the response behavior deemed desirable outcomes on the part of the client, can be specified, and reinforced when manifested.

This brings us to the part in the discussion where it is important to talk about some of the ways in terms of techniques, procedures, and conditions, which we feel are important and useful in the group counseling process.

To B. F. Skinner (1953-59), behavior disturbances are viewed as problems in the acquisition and retention of complex responses, and he feels they are subject to modification through the appropriate use of established learning principles. He argues that the use of appropriate learning techniques will permit a therapist to modify human behavior in desirable directions. Many experimenters have applied conditioning techniques in therapeutic settings, including interview situations, as well as to a wide variety of behavioral problems, such as neuroses and psychoses. (Krasner, Ulrich, et. al., 1966: Ullmann and Krasner, 1965).

From experimentation and application of learning principle, a considerable body of research has developed. Much of this research is applicable to group counseling situations. Many of the techniques, principles, and concepts will be defined and discussed in the following section.

Most of the procedures and principles, though developed with laboratory animals and/or individuals, have been used in various group situations. Krumboltz reports the use of reinforcement of certain clusters of verbal behavior in counseling settings (Krumboltz, 1968). Moyer shaped "understanding" responses in counseling groups with significant success (Moyer, 1968), while Bachrach (1960) used two experimenters as human programmers in the shaping of a third individual. Verbal conditioning techniques in a group therapy situation with schizophrenics was presented by Dinoff, et al. (1960), and Cieutat (1959) experimented with modification of verbal behavior in a classroom discussion.

Within the field of counseling and psychotherapy, there are many who think learning theory and methodology, and particularly operant technology, are only appropriate for application to simple processes. They doubt its application to more complex systems of response behaviors, or to complex theoretical concepts deriving from such sources as psychoanalytic or holistic theory (e.g., self-concept, ego strength, personal construct, etc.). However, many of the studies reported in this paper suggest that such a position may not be defensible.

One could conceptualize the individual as "holistic", which carries the implication that modification in one aspect or area of behavior, even though the increment may be relatively small, has as its consequence, changes in all other aspects. This suggests that learning may move from an arithmetic progression to a geometric progression in many instances. For instance, the modification of non-adjustive social behavior to adequate adjustive social behavior may result in the eventual change in generalized feelings of personal adequacy.

The relative simplicity of the procedure used, or the behavior modified, in no way minimizes the ultimate or historical complexity of the behavior or its relationship to the methodology. Complex behaviors may be altered or built up by the learning of relatively simple behaviors through a simple methodology. However, the contingency management methodology need not be simple or apply only to simple behaviors but may be as complex as the designer's creativity and ingenuity of the researcher. This approach to behavior change has become increasingly sophisticated since the 1920's, particularly in the laboratories and in the area of education. It is no longer appropriate to hold social reinforcement approaches to the simple reflex paradigm. The question is not whether the problem is suitable for the methodology, but how the methodology can be creatively expanded, and utilized in the service of the client.

There are several pragmatic advantages to continued application and investigation of the body of knowledge derived from behavior modification theory and practice to the many areas which concern counselors. It would facilitate the search for new, efficient, effective procedures and techniques for helping individuals in a variety of situations, such as educational (Hewett, 1967), individual interviews (Wolpe, 1961; Lang and Lazavik, 1963; Krumboltz, 1964; Salter, 1964), and group settings (Paul and Shannon, 1960; Moyer, 1968; Krumboltz, 1964; Patten, 1968; Lazarus, 1961).

Furthermore, it would tend to provide an ever-increasing and effective approach to counseling, which could be integrated into counselor training programs and taught with reassurance by those who are concerned with the increasing demands for psychological services and the somewhat opaque existing condition of counseling and psychotherapy.

It would add additional emphasis to the counselor and his behaviors as an independent variable (Krasner, 1965), and definitive research would be continued within the context of this methodology. This would add considerably to information about the aspects of the counselor's behavior or personality characteristics which contribute to the magnitude and direction of client change.

In speaking of the application of reinforcement theory to counseling, Krasner (1962) has pointed out that:

> .....certain assumptions are implicit in the selection of the type of research studies used to illustrate the major issues in research on the therapist variable in psychotherapy. These assumptions may be stated as follows: (a) Psychotherapy is a lawful, predictable, and directive process which can be investigated most parsimonously within the framework of a reinforcement theory of learning; (b) The variables which affect the therapy process are the same as those in other interpersonal situations which involve the reinforcement, control, manipulation, influencing, or re-direction of human behavior.

It has been found that characteristics such as sex, physique, prestige, personality, appearance, voice quality, and socio-economic status of the therapist are related to his effectiveness (Krasner, 1965). Further research is needed in this area, and it would appear that social-reinforcement approaches could provide an effective methodology for investigation.

By giving emphasis to behavior the researcher, as well as the clinician, has a decided advantage in evaluating both process and outcome. The clear specification of goals in behavioral terms, of pre-treatment analyses in behavioral terms, and of continuing assessment during treatment, provide a basis for comparison of pre and post- treatment criteria.

Another possible advantage which represents an often debated shift in emphasis concerns that of etiology and its relative importance to the problem of the client. Conditioning approaches, while admitting the historical influence on behavior, emphasize the present environment as the significant set of contingencies. The emphasis is not on the "whys" of a client's behavior, but on the present situations, including therapy, and "how" the client may be helped to emit adequate behavior. This "how" of help may be in the form of "how" desired behavior can be increased in terms of probability of frequency, modified along some topographical dimension, "how" it can be maintained and generalized, or, "how" the new or modified behavior can be made resistent to extinction.

McDaniel (1966), has pointed out that behavioral methodology represents a shift from theoretical-deductive, to an empirical-inductive approach to a problem. He states:

> A shift from theoretical-deductive approach to an empirical-inductive one is evident in dealing with each client or group of clients.......In counseling, this means that the counselor focuses attention on the goals and behaviors of each client, and sets as his task the planning of experiences that can yield satisfaction to the client, and at the same time move him in the direction of the goal he has set. This is the change in emphasis. Much of counseling, especially that which falls under the general tent of the psychotherapeutic tradition, has proceeded from a theoretical-deductive approach. The counselor had tended to ask: ' What does the basic theory indicate should be done for this client?' In the future he will ask: 'On the basis of the facts we know about learning, what procedures seem most likely to help this client learn to engage in the kind of activities that will produce the satisfaction he wants?'

WHY GROUPS?

The interest in groups has become so widespread, and their professional use so ubiquitous, that it is obvious there is strong motivation for this medium of communication and change. This interest in groups as a medium for psychological or behavioral change seems to have its origin in the demands pressed upon the psychological community by the public who is demonstrating an ever-increasing need, in terms of numbers, for these services. (Lazarus, 1961; Corsini, 1955). Furthermore, the efficiency and effectiveness of many long traditional approaches are being increasingly questioned. (Schofield, 1964).

The increased client-counselor ratio in groups, makes it apparent that group counseling is more efficient. The argument for efficiency seems to hinge upon the more important issue of effectiveness and the relative length of time that effectiveness is demonstrated. Regarding efficiency, Krumboltz (1968) has stated:

> The efficiency argument is clear-cut. If a counselor can help three, six, or ten students in the same amount of time that he would otherwise use to help one, then his time is being used more wisely and more students are benefited. To justify group counseling on the grounds of efficiency, one need only show that counselors can accomplish just as much with students in groups as they can working with students individually.

Approaches to spread the effect of counselors in therapy, in the service of efficiency, have been of three fundamental types: 1) Short-term treatment (Muench,1964; Schlien, Mosak, & Driekers, 1960), 2) Groups (Hunt, 1964), and 3) The application of learning principles to behavior change (Bandura, 1961), and combinations of learning approaches to behavior change within the group media (Lazarus, 1961; Paul and Shannon, 1966; Krumboltz and Thoreson, 1964).

There is good reason to believe that group counseling and psychotherapy is both efficient and effective for a wide variety of problems. This will be discussed further under "Response Classes", where the various kinds of behavior modified will be presented. Indeed, it would appear that the group provides a unique medium in its potential for changing behaviors of a social nature, particularly where anxiety is associated with the performance of effective and desirable social behavior. Paul and Shannon (1966), have suggested:

> The group setting also provides an ideal opportunity for persons debilitated by social anxiety to practice deficient skills after a degree of anxiety reduction has been attained. Initially, the group treatment appeared to increase immediate feelings of awkwardness. However, after a few sessions the group pulled together, ... typically left the clinic together, and reported socializing between sessions. Within treatment, the lively discussion of the training and its effects provides immediate positive reinforcement to changes in behavior and attitudes not possible in individual treatment.

While the researchers cited above work from within a learning theory that makes use of anxiety as an intervening variable, Bandura and Walters (1963) talk about the use of positive and negative reinforcement in an operant paradigm:

> Should one wish to produce discriminative social learning, the best procedure would undoubtedly be to set up actual or symbolic social situations, and repeatedly reward desired responses to these stimuli, while punishing undesirable responses or letting these go unrewarded.

Group settings would also tend to alleviate the anxiety associated with the feelings of alienation and uniqueness experienced by some people about their own problems, conflicts, or deficiencies. Frank discussion of these and others within the psychologically safe group context where frankness is reinforced, particularly when groups are selected homogenously by problems, results in the realization and comfort that others have similar difficulties. Performance and practice of new responses, which are incompatible with trouble-producing ones, may be more easily attempted and generalized from such a group context.

The debilitating presence of anxiety is not the only cause of ineffective social behavior. Ignorance of appropriate behavior, due to a lack of opportunity to learn it, may itself be the problem. Individuals from lower socioeconomic levels often do not appear to have behaviors which are adaptive and appropriate for movement across social lines. Groups can provide an opportunity for the imitation, performance, and practice of an adequate response repertoire associated with both group and individual encounter.

Therefore, groups have value as a medium for behavioral change for the following three reasons: 1) They are effective, 2) They are efficient, and 3) They have unique potential in that they can provide experience not offered in individual counseling for individuals who suffer from: (a) social anxiety that prevents them from performing adjustive behavior, and (b) social skills.

VERBAL BEHAVIOR

Among the most important issues in counseling and psychotherapy is that of the relationship of verbal behavior and its intentional manipulation through the application of operant methodology to behavioral change. The essential question appears to be whether verbal behavior can be modified in counseling groups and if these types of verbal behavior would generalize to or mediate: (a) perception, (b) attitudes toward both self and others, (c) feeling status or other complex associations, and most importantly, (d) overt behaviors in extra-counseling situations.

Verbal behavior is admittedly the most obvious behavior focus in counseling and psychotherapy, though most frequently it is considered vehicular, to another occurrence. Therapists, in accordance with their theoretical or methodological bent, provide conditions to influence the content and topographical features of the verbal behavior of clients. Many emphasize client "feelings" or clients talking about their experiences, both covert and overt, by the use of emotional words. Today much of counseling and psychotherapy appears to focus of this type of client response, and many strongly feel it is of primary importance for personality or behavioral change, or as an antecedent to such change. Krasner (1965), reports an experiment with just such a response class for the expressed reason that it had clinical relevance:

> We selected this response class for several reasons: the importance attached tothe use of emotional words in psychotherapy in various theoretical positions; the relationship between emotional words and other clinically meaningful material. the reliability of scoring this response class the naturalness of the use of emotional words in story-telling situations; and the relationship between emotional words and physiological changes. Our early expectation of the usefulness of this technique has born out in subsequent studies.

It is interesting to note in this experiment (Ullmann, Krasner, and Collins, 1961) the subjects in one group were conditioned, and they continued to use more emotional words in another group therapy situation.

B. F. Skinner (1957) has defined verbal behavior as : "Behavior reinforced through the mediation of other persons." It is no longer a debatable issue that verbal behavior can be modified, either in terms of class response frequency or along topographical dimensions. Recent reviews of the literature, and discussions relevant to counseling and psychotherapy, collectively cite hundreds of studies demonstrating the effectiveness of reinforcement as an approach for manipulation of many variables (Krasner, 1958; Strong, 1964; Williams, 1964; Krasner, 1965; Holz and Azrin, 1966). Indeed, content analyses of counseling and psychotherapeutic sessions reveal that there are significant correlations between the verbal behavior of the clients and that of the therapists, with the therapists providing differential degrees of empathy, directiveness, focusing, attention, etc., for certain kinds of client verbal content, emphases or intensity. (Traux, 1966; Bandura, Lepsher and Miller, 1960; Murray, 1956). Truax analyzed tapes of one of Carl Rogers' counseling cases which was considered successful, and found differential reinforcement effects. This is interesting in itself, but another focus of equal interest is the classes of behavior selectively responded to. Traux states:

> The therapist significantly tended to respond selectively with differential levels of empathy, warmth or directiveness to high and low levels of the following classes of patient behavior: (a) learning discriminations about self and feelings, (b) lack of patient ambiguity (patient clarity), (c) patient expressions of insight, (d) patient verbal expressions that were similar in style to the therapist's way of expressing himself, and (e) problem orientation of the patient.

These classes of verbal responses, though apparently selected unintentionally, may suggest some of the classes of client verbal repertoire which may be modified in a particular direction with profit to the clients.

It may be that various verbal response classes are related in a highly complex way so that the modification of one class results in changes in others. Or it may be found that it will be necessary to modify several classes of responses, within the context of a single or sequential interviews, in a manner analogous to the conditioning of concurrent operants in the laboratory. This is not frequently attempted in research, but is an area which is in some need of exploration. However, counselors and therapists are increasingly using their own verbal and non-verbal behavior in such a way as to define the effective relationship between their behavior and that of their clients. Krasner (1958) has pointed out:

> To the extent that a therapist is aware of the reinforcing effect of his own behavior, to the extent he can with deliberation set out to modify verbalization in the directions his approach teaches.

He has described psychotherapy as a "shaping" procedure. This is accomplished via verbal social reinforcers administered as determined by the therapist. He considers this process as "lawful". The effective therapist is one who has been adequately trained to use social reinforcement; the principles of learning methodology. He says that social reinforcement is the: "Use and manipulation of environmental stimuli to reward pre-selected classes of behavior to increase the probability of their reoccurring."

A wide variety of simple responses and a considerable number of complex behaviors have been investigated using behavioral methodology. Studies are presented relevant to this area which fall into two categories: The first includes research on important behaviors, such as attitudes, self-concept, emotions, etc. These are reported on because they demonstrate the wide range of response classes which can be modified through behavioral methodology. Many of these studies are done in a non-group setting. The second category includes those which have been conducted with groups.

RESPONSE CLASSES MODIFIED

Behavioral counseling, according to Michael and Meyerson, (1962) is a different approach. In their words:

> A behavioral approach to counseling and guidance does not consist of a bag of tricks to be applied mechanically for the purpose of coercing unwilling people. It is part of a highly technical system, based on laboratory investigation of the phenomena of conditioning for describing behavior and specifying the conditions under which it is acquired, maintained, and eliminated.

The primary dependent variables in behavior modification approaches tend to be variation of response frequency. This necessarily introduces the problem of operant level or the base-line frequency of a given response. In its simplest form, it is the problem that Greenspoon (1955) observed in attempting to increase non-plural nouns. He found that reinforcement of this described class of responses had less effect than on the class defined as plural nouns. He suggested that the problem was the fact that the relative frequency of the non-plural noun response class was so high as to provide little opportunity for an increase. This suggests analogically that where there are complex relationships between several response classes, the careful selection of the operantly low level one is important.

Another problem, and one the counselor or therapist most frequently faces, is the almost non-existent operant level; the almost complete absence of a response class which is desirable. Ways of ameliorating this situation have been attempted by many researchers, and are simply presented here: 1) To shape the response class from the existing repertoire, 2) To allow long preiods of time in terms of counseling sessions for the responses or some approximation to occur, 3) To provide some additional information which may elicit some elements of the desired response class, such as "interpreting", and 4) To have the individual attempt new responses by counselor prescription.

Though variation in frequency is the most typical dimension studied, some studies are available which indicate attempts to modify behavior along topographical dimensions. Admittedly these are few in number and success is often equivocal. Azrin and Lindsley (1956), reported that it is possible to begin with a minimum of socially cooperative responses, and to increase them in both frequency and topography. Eisenman (1965) showed that sequence, as well as rate of conversation, could be manipulated.

Many counselors, psychotherapists, and researchers are convinced that intrapersonal exploration is a necessary antecedent for personality change. Though it would appear that this type of behavior is antithetical to the behavioral approach, the methodology can, in fact, be utilized to determine if such response classes can be successfully manipulated by a group leader to additionally determine if they contribute to change on external criteria. Truax and Carkhuff (1967) found that reinforcement of self-exploratory responses within a group counseling setting resulted in a significant increase in the frequency of this type of statement, along with an improvement in outcome criteria.

Zelik (1959) conducted a study which indicates that emotion-laden topics which are experienced as aversive or anxiety producing by clients can be shaped or controlled by the therapist. She reinforced response classes with negative cultural connotations which are usually avoided, and found varying degrees of client awareness of the contingencies. She interpreted her finding as supporting the hypothesis that social reinforcement increases the frequency of such a response class. She says:

> Thus unlike the case where neutral responses are reinforced, reinforcement is here pitted against the natural tendency to avoid or suppress association with negative cultural connotations. The experiment takes on added interest because of the parallel with psychotherapy.

She further quoted some of her subjects as saying that though they were unaware of the contingencies, they were aware of their use of aggressive words even though they did not like to, nor want to, and did not understand why they continued to do so.

Waskow (1962) was unable to increase the frequency of "feeling talk" by reinforcing it. He used "reflection of feelings" as a reinforcer. The explanation for failure to obtain significant results was that this kind of counselor response produced anxiety, and that this decreased the "feeling talk". This points up a common fallacy in procedurally defining a reinforcer. Though this will be discussed under another heading, suffice it to be said here that a reinforcer is defined methodologically as a stimulus event which increases the probability of occurrence of the response which precedes it. It is, therefore, defined by its consequences, rather than its properties. In Waskow's study "reflection of feelings" by the counselor did not reinforce "feeling talk" by the client.

Personality change has been the subject of several experiments using verbal conditioning as the procedure. This is of interest to clinicians and researchers involved in psychotherapeutic encounters, where verbal interaction between individuals is designed to contribute to personality change.

Konig (1962) attempted to change scores on the Test Anxiety Scale (TAS). He focused on two response classes related to academic areas. These response classes were: 1) Negative self-statements, and 2) Positive self-statements. The experimental sessions were defined as "free verbal" in nature, but limited to client expression of feelings about himself as a student. There were two experimental groups, with one conditioned to negative self-references, and one conditioned to positive self-references. He found that there were no changes in scores on the TAS for those reinforced for positive self-statements, but there were significant decreases on the TAS for those reinforced for negative self-statements.

Hermatz (1967) used a method that manipulated "the degree of endorsement S's indicated to positive or negative self-references." His intention was not to increase the frequency of an existing response class in the subject's repertoire, but to initiate new responses and to shape these into stable components of the subject's repertoire, thus changing the content of the repertoire. He presented self-referent items on 3 x 5 cards, and had each subject rate himself along a 9-point scale as to the degree to which he endorsed each specific stimulus. Subjects were reinforced for increasing the degree of endorsement of positive self-reference along the scale. He also reinforced a group for "accepting positive self-references as true of the self, while simultaneously reinforcing them to more strongly reject negative self-references as being untrue of the self, and vice-versa." His results indicate that the procedure was effective in controlling the subject's verbal behavior and there was generalization on several, but not all, of the personality tests on post-conditioning re-tests. Hermatz makes the following interesting observations:

> This study argues against the use of reinforcement for increasing the frequency of what is being said by the patient. The present procedure would recommend a technique where the subject is no longer saying the same things which were part of the personality he brought to the therapy to be changed in the first place. The techniques for doing this are not necessarily new. Interpretation is a method of telling the patient something he himself will not or cannot say. Role playing is another method for investigating new responses to old situations. Thus, the therapeutic procedures may

> not be new, but their application should
> be.....

This was a particularly interesting experiment in that frequency of an existing low operant repertoire was not the focus, but the addition of new material.

Rogers (1960) used 36 male university students in an introductory psychology course as subjects in an experiment designed to test the hypothesis: Simple reinforcement of subjects' self-reference verbalizations can be manipulated, and there will be changes in the subjects' concept of self as measured by the Q-sort test. His findings indicate that successful conditioning of self-references in counseling did not modify self-references outside of therapy, or alter scores on tests of anxiety or emotional adjustment. It should be noted that Rogers' treatment groups received only ten minutes of conditioning per session for six sessions each in a quasi-therapy setting.

In an experiment which used both experimenter verbal statement and a mechanical apparatus for reinforcers, Nuthmann (1957) attempted to modify self-acceptance as measured by a true-false self-acceptance test which she constructed especially for the experiment. She selected subjects who made low scores on the self-acceptance test and had them retake the test in an individual session. The subject was required to throw a switch indicating a true-false answer and when an answer reflected the subjects' "acceptance of self", he was reinforced by "good" in one group, and by a "light blink" in another. She found that there was a significant change toward increased self-acceptance for the group reinforced with "good".

It has been demonstrated in the previous studies that verbal behavior in a clinical setting can be altered by manipulating the reinforcement contingencies. Many researchers have shaped verbal response classes believed associated with personality variables; others have manipulated behavior associated with such theoretical constructs as self-concept. As noted in the research cited above, even statements which are strongly disapproved by the culture are subject to control. The conditioning of the frequency of use of words has been demonstrated as measured by verbal behavior in group situations (Ullmann, Krasner, Ekman, 1961; Ullmann, Krasner & Collins, 1961; Salizinger & Pisoni, 1960).

Numerous response classes associated with covert mediation of either-other covert responses,such as autonomic events, or with overt-verbal or other motoric responses have been investigated. This paper is in no way inclusive of every type of response class, which has undergone experimentation. A few of importance will be presented for two purposes: 1) To indicate their amenability to modification through verbal conditioning, and 2) To indicate that it is possible to formulate procedures for group models using behavioral methodology which is effective.

Maltzman (1960) has suggested that even a complex behavioral repertoire such as "originality can be learned. He believes the same principles of conditioning which are used for other forms of operant behaviors are applicable to generating "originality." The elicitation of common responses to stimuli in order for the uncommon response classes to be reinforced, and consequently increased in terms of probability of their occurrence, seems to be necessary.

Meaning has been the subject of other experiments. Theoretical formulations have postulated that if word classes can be conditioned, they are members of a verbal habit-family, and therefore, possess a common meaning response component (Staats, 1961). Noble (1952) says that logical meaning is empirical and tends to increase linearly as a function of the frequency of particular stimuli and multiple response connections established. Lifton and Blinton (1954) feel that semantic generalizations and concept formation fit the mediation paradigm and are subject to conditioning. These researchers scaled eight nonsense syllables on a sematic differential, and used them in a concept formation task. They re-scaled them and paired certain new meaningful nonsense syllables with an electric shock. GSR measures were taken on subsequent presentation of related and neutral syllables during an extinction period. Their conclusion was that the manipulation of experimental conditions can result in predictable changes in meaning. Mowrers' (1960) revised sign-learning theory subscribes to the application of learning principles to observable human response sequences. In this theory, emotions are conditioned and mediate functional responses which serve the individual by either increasing the positive emotions, or decreasing the negative emotions.

Attitudes and perceptions have been the subject of other experiments. Groups as a medium, and operant conditioning as the methodology has been a fruitful combination of many of these studies. Using an unusual experimental approach, Razran (1938) had one hundred (100) individuals rate thirty photographs of girls for intelligence, beauty, character, ambition, entertainingness, and composite general-liking. After attaching Italian, Jewish and Irish surnames to some of the pictures, he had the same population repeat their ratings. These second ratings revealed obvious biases, with the pictures having Jewish names attached having the greatest decrement in liking. He then presented the pictures with the greatest bias to the raters while they were given a free luncheon and the pictures with the least bias while the raters were hungry. A third rating of the picture indicated a removal of the bias. Razran concluded that the bias was eliminated through this simple pairing of stimulus events through conditioning. In another study, Razran (1940) used essentially the same paradigm and got significant changes on ratings of socio-political dogmas, such as "Mexican-Americanism" and "Down with Fascism," on the basis of personal approvals, social effectiveness, and literary value. He also administered an objective check list, representing the stimulus events under two conditions: 1) during lunch, and 2) while subjects were inhaling unpleasant odors. The consequences were as predicted; those slogans presented during unpleasant olfactory stimulation decreased primarily in literary value and in personal approval. The adjective check list underwent similar changes. The subjects were unaware of the presentation of the slogans under any situations. Bostrom (1961) reported attitude change by the random assignment of high, low, and no grades to essays which defended positions on attitude-related issues. He found that the high grades were effective in producing attitude change in the subjects who received them.

The previously cited studies have dealt with effecting learned changes in various classes of responses. Let us now consider the concept of stimulus generalization as it relates to learned changes in response classes.

GENERALIZATION AND RESPONSE CLASS

Behavior in many, if not most, situations does not clearly qualify as learning, but is the reappearance of responses learned in similar, but different situations. There are many examples of this. Freud talked about "transference" in the therapeutic relationship. In this situation (transference), responses (generally affect) learned in relation to such stimuli as father, mother, sibling, etc., are transferred to the analyst. Dollard and Miller (1950), while speaking of transference as a special kind of generalization, explain how this effect occurs with all kinds of behavior.

> Similarly, our immediate like and dislike of other persons in the ordinary course of life are transferred responses. Without knowing it themselves, strangers may present us with cues to which we immediately generalize love or hate.

Great emphasis has been placed on the generalization of prior learned responses to new situations, particularly when these responses are inappropriate or self-defeating.

For the purposes of our present discussion we are concerned with the following questions: 1) Does behavior which is conditioned generalize? 2) What kinds of behavior generalize to what kinds of situations? 3) Inasmuch as counseling is primarily a verbal process, where the client's verbal behavior is the dependent variable, can generalizations of new or modified behavior be expected outside the counseling situation? Perhaps no other issue is of more interest and concern to the counselor.

To date, relatively little attention has been directed toward the study of generalization of behavior from the conditioning therapy siutation to the external environment, and what attention has been directed toward this phenomenon indicates equivocal results. As both Krasner (1958) and Bandura (1961) have pointed out, the experiments in most studies have been conducted over very short periods of time, barely permitting the demonstration of conditioning effects, much less generalizations of these effects. However, where operant conditioning methods have been fairly well tested, there is sound experimental evidence that indicates their effectiveness in promoting changes in interpersonal behavior in clients in extra-therapy situations (Peters and Jenkins, 1954; King and Armitage, 1958). Other studies are discussed below.

Krasner (1965) suggests one of the reasons research has failed to demonstrate the generalization of learned behaviors may reside in the difference between the response class conditioned and the criterion measures. Hermatz (1967) suggests that failure to get generalization effects to personality instruments may be due to the fact that most studies attempt to increase the frequency of an existing response class within an existing repertoire (usually negative or positive self-referents), rather than changing the context of the repertoire. Generalization seems to be related closely to the degree of similarity between the situation in which the behavior is learned, and the criterion situation. Schein (1954) investigated the generalization of imitative behavior with adults. Three tests of generalization were given varying along the dimension of similarity to the original test situation. He found that the most generalization occurred in the most similar situation, some generalization occurred in the intermittently similar situation, and none was observed in the least similar situation.

A few recent studies have attempted to demonstrate that the use of verbal conditioning techniques which change verbal behavior of clients result in changes on post-conditioning personality instruments. The results have been equivocal. (Hermatz, 1967; Rogers, 1960; Konig, 1962).

Criterion instruments, however, are relatively recent measures of dependent effects in conditioning research. The problems with generalizations after achieving conditioning effects may reside in the following three areas: 1) The response class(es) conditioned may be different than those assessed by the personality instrument 2) The instrument may not be valid, and consequently conditioning may suggest a method of checking the relevancy of the instrument, and 3) Where the variable being investigated consists of classes of functionally related responses; one or more response classes may not have been concurrently conditioned. Aside from these difficulties, however, generalization has been demonstrated by several researchers for a variety of behaviors.

Dinoff, Horner, Kurpiewski and Timmons (1960) found that verbally conditioned behaviors that had been operantly modified in a group therapy-like situation generalized to a free discussion group. The generalization resulted irrespective of the response classes reinforced in their study. In an experiment by Ullmann, Krasner, and Collins (1961), subjects were reinforced for using emotional words in a group therapy situation. Kinzie and Siprelle (1967) also demonstrated generalization from individual to group situations, and vice versa.

Johnson (1964) in a study of the transfer effects of treatment group composition on pupils' classroom participation where the counselors reinforced verbal behavior of the subjects, found participation significantly increased in the counseling session, and the reinforced behaviors generalized to the classroom.

Krumboltz, Varenhorst, and Thoreson (1967) designed an experiment to determine if the prestige level of the counselor and attentiveness or non-attentiveness to the client in a model video-taped counseling interview would effect the information-seeking behavior of the subjects. They found that female high school students in their experimental group produced a greater variety and frequency of information-seeking behavior than the control group.

In an interesting study by Ryan and Krumboltz (1964), the experimenters reinforced "deliberation" and "decision" types of statements. They found that both types of statements could be increased in as little as six to ten minutes in counseling interviews. For the groups reinforced for decision behavior, there was a tendency to make decision-type responses later in a classroom setting, as detected by the use of a projective-type of problem test.

Moyer (1968) investigated the effects of selective reinforcement of nurses' "understanding" responses in group counseling situations. Two instruments were administered in a pre-test and post-test design and an analysis of the tapes of the sessions was made. His findings indicate significant generalizations to one but not both instruments. Tape analyses clearly indicated the effectiveness of selective reinforcement for increasing the frequency of the specified response class.

Patten (1967) attempted to modify teachers' perceptions of students' behavior in a group counseling situation. He used four counselors and four groups, and found from pre and post-test comparisons no significant changes in negative perceptions, but a significant (greater than .05) change (Generalization) in positive perceptions as measured by an analysis of a selected of 500 daily log statements (from 1200).

Graham (1968) compared counselor verbal reinforcement of positive statements concerning mate in a joint counseling setting with the effect of a problem-centered counseling approach without positive response by the counselor. A random selection of 36 couples made up the population, and his findings are as follows:

> Clients who eventually became reconciled were those who made the most positive references to mate during the counseling sessions. Clients exposed to four, fifty-minute joint counseling sessions, with positive responses from the counselor were reconciled more frequently than clients exposed to two individual fifty-minute sessions. This showed significance at the .01 level.

One can see from this limited review of the literature that it is reasonable to expect generalization effects. It has been demonstrated that several kinds of behavior will, generalize when operant conditioning techniques are used adequately in terms of the response class to be reinforced, and the criterion measures used. These methods appear to be effective with many diverse populations, such as psychotics, elementary school pupils, etc. The kinds of behaviors which have been demonstrated to generalize are perceptions of mates (Graham, 1968), decision and deliberation responses (Ryan and Krumboltz, 1964), understanding responses (Moyer, 1968), information-seeking behavior (Krumboltz, et. al, 1967), classroom participation (Johnson, 1964), significant changes on personality instruments, (Hermatz, 1967; Koenig, 1962), and interpersonal behaviors (King and Armitage, 1958).

FOUR CENTRAL CONCEPTS

Many conditions, proceudres, concepts and techniques have and will be discussed within the context of this behavioral rationale. However, listed below are four essential concepts which tend to cross most research applications, and which have been found central to the modification of behavior. They will be discussed at length in the body of this rationale, and supported by a considerable body of research. From a counseling point of view, the four most important concepts are: 1) Reinforcement, 2) Intermittent reinforcement, 3) Selective reinforcement, and 4) Successive approximation.

1) REINFORCEMENT: (a) Positive reinforcers are stimuli such as food (primary) or verbal responses (secondary), that, when presented subsequent to a response, increase the probability of the occurrence of that response. (b) Negative reinforcers are stimuli that increase the probability of the response which terminates them.

2) INTERMITTENT REINFORCEMENT: This refers to a way reinforcers can be distributed according to two criteria: the passage of time, or the number of responses, or some combination of these. A vast amount of research has been devoted to the analysis of reinforcers in the operant conditioning siutation. The most significant finding is that when reinforcers are

presented intermittently, the learned behavior is more effective in terms of resisting extinction. Responses intermittently reinforced tend to be very resistant to extinction; that is, they are persistent through only occasional reinforcement.

3) SELECTIVE REINFORCEMENT: This refers to the fact that in an operant conditioning situation, such as a counseling setting, only particular client responses are reinforced, while others are not. The use of this procedure enables the experimenter to simultaneously strengthen a specified response and extinguish an undesirable one.

4) SUCCESSIVE APPROXIMATION: This refers to the gradual and graduated building up of a new response from the persons existing repertoire, or from counselor prescribed responses, through the use of reinforcement. It is possible to begin for example, with a minimum of socially cooperative responses, and to modify them in both frequency and topography (Azrin, and Lindsley, 1956).

AWARENESS AND THE REINFORCING EVENT

It is generally known that "rewarding" or punishing behavior has consequences relevant to that behavior in terms of frequency and/or topography. However, it is apparent that much behavior is shaped without, awareness of either the person doing the reinforcing, or the persons behaving. The assumptions that either dimension is rational, or must be, is not sustained by research. Michael and Meyerson (1962) have stated:

> However, the effect does not depend on a rational process at all. The foreseeing of consequences or the ability to state the relation between the consequences and the behavior which produced it is unnecessary. Any behavior which is followed by reinforcement in all of the many species studied, and above all, in man -- is more likely to occur again in the same or similar situation. This could be called the automaticity of the effect of reinforcement. To increase the occurrence of a particular class of behavior, it is necessary only to ensure that reinforcement occurs relatively soon after the behavior.

In a study of avoidance conditioning of verbal behavior without awareness, Eriksen and Keuthe (1956) found that there were no reliable differences between "insight" and "non-insight" groups in terms of rate of learning, or on the number of trials to achieve the criterion. Greenspoon (1955) likewise found that not only could the verbal behavior of subjects be manipulated, but that in many cases, they remained totally unaware of the fact that their behavior had been modified.

Some studies concerning the interaction of conditionability and awareness indicate that subjects who were aware of the response-reinforcement contingency showed significantly greater improvement than unaware subjects (Speilberger, Ratliff, and Bernstein, 1966; Philbrick and Postman, 1955; Sidowski, 1954).

Other experimenters have demonstrated that conditioning the verbal behavior of subjects can occur without their awareness. (Verplanck, 1955; Nuthmann, 1957).

Krasner (1955) found that not only the verbal behavior of subjects could be manipulated, but that in many cases they remained totally unaware of the fact that their behavior had been modified. Krasner (1965) discusses this phenomenon and comes to the conclusion that: "...verbal conditioning allows for the manipulation of 'awareness' itself in such a way as to permit the measurement of its influence on S's subsequent behavior." Holtz and Azrin (1966) in a discussion have stated:

> Investigations of the control exerted by instructions and the attendent conditions seem ultimately more capable of leading to greater clarification for the factors controlling verbal behavior than an endless repetition of the question: 'Are they really unaware?' The repeated asking of this question seems to have served only to delay investigation of objective determinants.

REINFORCING STIMULI AND THE THERAPIST

Much of human behavior, particularly that involving the voluntary nervous system, verbal behavior, is operant in nature. This simply means that acts have consequences in the environment and are largely mediated by the environment.

By mediation, in this sense, we mean that behavior or responses, or approximations of behaviors which are followed by some form of reward, will increase in probability of occurrence; or when a response terminates or avoids an aversive consequence, it too will increase in probability of occurrence; or be modified along a topographical dimension. The initial loci of these reinforcers, both positive and negative, are in the external environment. They are controlled either implicitly, or explicitly by other people, including counselors or psychotherapists.

For these behaviors, the critical events are the environmental consequences. The stimuli, which are the factors responsible for the creation of new behaviors, the maintenance of both new and old behavior, or the modification of deficient or inadequate behaviors, will be discussed below.

It must first be understood, reinforcers are not defined by their properties, but by their effects. A positive reinforcer is a consequence or stimulus event which increases the probability of the behavior which preceded it.

This is a functional definition, and no specification of the properties of the stimulus event are identified. This is pointed out because reinforcement as a functional concept is sometimes confused with a stimulus event defined as a reinforcer in a procedural application. When stimulus events such as "empathic reflection", "interpretation", "blinking light", or and "M & M" are used in an attempt to modify behavior along some predicted dimension and does so, it can be defined as a reinforcer for that situation, behavior and subject, and can be used to modify other behaviors for the subjects involved. When, however, a stimulus event such as those mentioned above, is used and the predicted consequence is not forthcoming, it is not necessarily appropriate to say that the behavior being studied is not forthcoming, it is not necessarily appropriate to say that the behavior being studied is not subject to control using the methodology, nor even that the stimulus event is not a reinforcer, but that it is not a reinforcer for that situation or subject. Honig (1966) in a footnote to his discussion of definitions of terms, has pointed out:

> Functionally defined terms are sometimes used to refer to application of procedure even when it does not result in the specified effect. Thus, one may read, "Even the application of repeated punishment had no effect upon the rate of response." In a case like this, 'punishment' refers to a procedure which is normally effective, and a distinction should indeed be made between a 'procedural usage' and a 'functional usage'in cases of this sort. I would contend that the functionally defined concept is the more fundamental, and that the strictly procedural usage is derived from it.

The care and specificity involved in selecting response classes to be generated or modified is equally applicable to the selection and definition of the counselor or therapists verbal and non-verbal responses, which will be used to attempt control. It is very difficult to delineate the stimulus (counselor reinforcers), because it is so ambiguous when such complex responses as reflection of content, affect, interpretation, etc., are used. Continued efforts to clarify the reinforcing qualities of the counselor are essential. For example, by careful observation and experimentation, it may be discovered that responses which have been traditionally used for achieving theoretically sound consequences are, in fact, counter-indicated.

Positive reinforcers are often called rewards (Bandura, 1961) and are experienced by the individual as pleasant or satisfying. A primary positive reinforcer is biologically significant to the individual, such as water, sexual contact, food. Others acquire their positive reinforcement qualities through pairing with other reinforcers, and become significant to an individual through experience. These are called conditioned reinforcers. Some of these would be praise, affection, grades, money, etc. There are very important in terms of most human behavior. Some secondary or conditionedreinforcers can take precedence over a primary reinforcer because they have been paired with many other conditioned or unconditioned (primary) reinforcers, and because they have acquired the qualities of being means to several different consequences, almost developing to ends in themselves. Michael and Myerson (1962) list among these: "Social approval, successful manipulation of the physical environment, affection, and others. These are called generalized conditioned reinforcers."

Skinner (1957) in discussing social approval, says:

> A common generalized conditioned reinforcer is 'approval'. It is often difficult to specify its physical dimensions. It may be little more than a nod or a smile on the part of someone who characteristically supplies a variety of reinforcements. Sometimes....it has a verbal form: 'Right' or 'Good', because these 'signs of approval' frequently precede specific reinforcements appropriate to many states of deprivation. The behavior they reinforce is likely to be in strength much of the time.

We have seen how important social approval, including counselor verbal responses, is in modifying behavior. Client-centered approaches have demonstrated the value of such social reinforcers as understanding, acceptance, unconditional regard, etc., and many experimenters have demonstrated their efficacy in establishing the "conditions for change", as Rogers describes it. Truax (1961) has demonstrated that intrapersonal exploration in the client, an antecedent event essential to personality change, is influenced by the counselor who manifests empathic understanding, accurate empathy, positive regard, and who uses his own verbal and non-verbal responses (accurate reflection) as a vehicle to convey his understanding to the client.

Krasner (1958) points out: "To the extent that a therapist is aware of the reinforcing effect of his own behavior, to that extent he can with deliberation set out to modify verbalization in the directions his approach teaches."

A positive reinforcer increases the probability of the immediately preceding behavior. If the counselor is attentive when I talk about my feelings and I subsequently talk more often about my feelings, the counselor's attentiveness constituted a reinforcer. A negative reinforcer increases the probability of the behavior which terminates it. If the counselor stops frowning when I cease negative self-referents and start saying positive things about myself, then positive self-referent statements are reinforced because they terminated the aversive stimulus of the counselor's frown.

In both situations, the consequence is the same: the probability of a response increases (Skinner, 1953). Some negative reinforcers are extreme cold, heat, loud noises, etc. However, through associational experiences, certain words such as "bad", "wrong", or combinations of words in phrases or sentences, such as, "You are wrong", take on aversive qualities. Certain non-verbal communications also have aversive qualities. Not listening or ignoring is experienced as aversive to those it happens to, and facial movements or negative gestures are also among the conditioned aversive stimuli.

Aversive control is not a widely, or at least consciously, used technique in counseling interviews. It is not unusual, however, for it to occur in counseling groups. If, for instance, an individual does not talk about his "feelings" and "thoughts" in a counseling group which has as its contingency such a process, it is not long before other members of the group "attack" him. They will voice their irritation and disapproval of his behavior, as well as tell him the general class of responses he can make which will terminate their disapproval, and for which he will be reinforced (understood, sympathized with, etc.).

SPECIFIC REINFORCING STIMULI

A wide variety of reinforcing stimuli have been utilized by researchers attempting to manipulate response classes. Many are relevant to the counseling and psychotherapeutic setting.

Verplank (1955) designed an experiment using two classes of reinforcing stimuli. One was agreement, which was defined as the "that's so", or similar verbal responses, and non-verbal stimuli, such as head-nodding and smiling. A second was paraphrasing which was defined as repeating back to the subject a pharaphrase of what he had just said. The subject's response class under study was statements of opinion. This response class had to begin with, "I think", "I believe", "It seems to me", "I feel",and the like. He found that both response stimuli were effective as reinforcing events, but they were not equivalent. He pointed out that paraphrasing was much more variable in its effectiveness, and both the greatest and smallest changes in stating opinions were produced by paraphrasing.

Paraphrasing was used as a reinforcing stimulus in a study by Merbaum and Southewell (1965). They also used "echoic" responses. This study was designed to investigate the effect of these two forms of intervention in the conditioning of self-referent affective verbal behavior. The subjects in the paraphrase group received a paraphrase of the affective words occurring in affective self-referent statements immediately after the statement. The subjects in the "echoic" group were responded to with a repetition of the affective words occurring in their affective self-referent statements. Their findings indicate that paraphrasing was significantly more effective as a reinforcing stimulus than echoics.

Graham (1968) defined a class of reinforcing stimuli which place emphasis on the clients perceptions. His counselor responses were: "You have noticed", "You are concerned", "You see your wife/husband as....", "You appreciate the fact", etc. These were used to modify mate perceptions of one another in a counseling situation. Significant changes were produced.

Many human verbal responses are perceived by clients as reinforcing. Some experimenters have reported that the reinforcing value of a stimulus was probably a function of whether the subject perceived the reinforcement to be dependent on his own behavior (James and Rotter, 1958; Phares, 1962; Rotter, Liverant, and Crowne, 1961). Experimenters interested in indirect reinforcement have reported that in general, direct reinforcement was more effective than vicarious reinforcement. However, the latter was usually significantly more effective than no reinforcement. (McBreartly, Marston and Kanfer, 1961; Phillips, 1965).

Practically every major discussion about reinforcement has emphasized the necessity of immediacy of its presentation. This appears especially necessary in groups where other members might respond and contaminate the effects of the reinforcing stimuli (Salinger, 1959). Krasner (1965) has presented an approach to the problem of reinforcing in a therapeutic situation which may eliminate considerable stiltedness in implementation, and take advantage of the personal qualities of the counselor. He reports research where:

> ...the examiner was programmed differently. The nature of the verbal conditioning studies was explained to the examiner and included: the theory behind reinforcement procedure; the definition of reinforcement in terms of behavioral cues on the part of the examiner indicating interest and attention; examples of reinforcing cues, such as 'head nodding', 'smiling', 'humm-mmm', and 'good'. The class of behavior to be reinforced was clearly defined for him, but the specific manner of reinforcement was left to himself to do what was most natural for him within these prescribed limits. Thus, the attempt was made to make use of more natural human reinforcement qualities.

COUNSELOR AS A GENERALIZED REINFORCER

Counseling takes place in a unique social situation that is formed when the counselor meets with an individual or a group to discuss the problems of the latter. Verbal behavior as stated above is the most characteristic dimension of this process. It appears conversational in content, where talking about certain things rather than others is the most common, but not exclusive, mode of operation.

In order for the clients to talk freely about their feelings about themselves and others, their problems, or to practice new behaviors, they must feel comfortable and psychologically safe. For such feelings to exist, they must perceive the counselor as an individual who is concerned with them, who will accept them and what they want to talk about non-judgmentally. A feeling of general warmth, liking, and trust, is essential. If a feeling of mutual respect and liking can be achieved, the counselor is in a position to use his skills, techniques, and knowledge effectively in the service of the client. Though such therapist characteristics as sex, physique, prestige, personality, appearance, voice quality, and socio-economic status have been found to be related to counselor effectiveness, the discussion of all of these is not within the scope of this paper, (Krasner, 1965).

It is assumed that counselors trained and skilled in developing a group climate of psychological security, with respect for clients, and whose personality has relatively high dimensions of warmth and concern, will be effective as a reinforcer, model, etc.

The clients themselves will bring considerable generalized responses and expectational sets to the group situation. These responses will have been learned in prior situations where the individual experienced persons in authority over him, such as parents, teachers, policemen, or even employees.

It can be expected that both negative and positive responses will be generalized to the counselor. However, in the American society there are certain professional groups which are typically perceived positively as sources of assistance, such as counselors, doctors, etc. To the degree that the client's previous experience has been satisfying or positive with counselors, social workers, or like groups, it may be assumed that the generalized responses will be positive, thus giving the counselor positive reinforcing qualities. The counselor who is reasonable and perceived as a tentative source of help will probably be perceived as a positive reinforcer. This is not a completely stable condition, however. The counselor's original strengths as an influencer will weaken if he does not maintain his strength as a source of positive reinforcement.

Studies by Verplank (1955) and Truax (1961) contribute to an understanding of the counselor in the reinforcement of response classes. Verplank's study clearly demonstrates that people carefully trained to identify and selectively reinforce specified response classes were significantly more effective than untrained people. Truax suggested one of the group conditions directly under the control of the therapist was empathic understanding. He must, however, be an empathic person and demonstrate it to the group.

Attention (Bandura, 1961; Krasner, 1965) is known to be positively reinforcing under most circumstances. This is true because as an infant, as well as in later stages of development, someone attending to you is the first requirement to the satisfaction of needs. Thus, this attention tends to become powerful and positive as a reinforcer. Empathy and warmth (Truax, 1966) are also positive reinforcers and the counselors variation of these has important consequences in terms of client responses.

PRESCRIPTION AND COUNSELING

Prescriptions include a wide variety of activities which are defined and implemented by the counselor for the purpose of getting the client to attempt ways of behaving which will mediate personality or behavioral change of a lasting nature. It is a process widely used by therapists in every camp though the prescription may not be defined explicity (Eriksen, 1958). Both client-centered counseling and psychoanalytic psychotherapy hypothesize that intrapersonal exploration (Truax, 1961) is the necessary antecedent condition for personality change, and their approach is to get the client to communicate in this manner about himself. This may be accomplished implicitly by continuous reflection of feelings and content level self-talk or through carefully training the client to free-associate.

Behavioral approaches tend to define explicitly the specific behaviors deemed as desirable, both verbal and motoric, and to positively reinforce approximations of this behavior when manifested, and under certain circumstances provide aversive stimuli (shock, loud noises, deprivation, inattention, etc.) when behavior of an incompatible type is persistently manifested. Ullmann and Krasner (1965) have mentioned several research studies using this approach with severely disturbed individuals, such as psychotics and neurotics.

Prescriptions may be defined as written procedures for identifying and eliciting desired client behaviors (dependent variable), and for identifying and employing contingent reinforcing counselor behaviors (independent behaviors) so as to modify client behavior in predictable and desirable ways. The assumption is that behavior, selected by experienced counselors, performed, practiced, or engaged in by the client, and then reinforced selectively according to the principles of learning can provide: (a) the establishment of a stable behavioral repertoire appropriate to specified situations, such as problem solving, communicating, social behavior, etc. and (b) can provide the antecedent conditions for personality change, changes in self-concept, etc. For the most part the prescriptions used within the context of counseling models are introduced either during the initial session or in successive sessions as approximations to a specified goal. In some instances they are explicit, though frequently in counseling settings neither the ultimate goal nor the conditions for reinforcement, nor the reinforcement itself, is delineated.

Several current theorists take a very overt, cognitive approach to behavioral change, and prescribe behavior which they feel will best facilitate this. Salter (Patterson, 1966), working out of a learning theory approach, suggests six techniques which he considers inter-related and "by practicing any one of them, the subject is, in effect, learning all of them." These are:

> 1) Feeling talk: This is deliberately saying what you feel. It consists of being emotionally outspoken, saying what you feel when you feel it, such as tenderness, fear, likes, dislikes, annoyance, love, surprise, remorse, regret, etc. 'The rule is emotional truth'.
> 2) Facial talk; This is indicating what you feel through facial expressions. This is a non-verbal form of communication and should be compatible with both covert and verbalized feelings.
> 3) Contradict and attack: This is the alternative to pretending agreement when, in fact, you do not agree.
> 4) Use the word 'I' as often as possible.
> 5) Agreement when you are praised: The client is told to accept praise from others and agree that he is worthy of praise; he should praise himself

> voluntarily as well.
> 6) Improvisation: This means to act spontaneously without plan or thought. To live for today, the hour, the minute. This would seem to be for clients who are very inhibited and Salter's sole diagnosis is in fact, always 'inhibition'. His approach emphasizes action, and he says: "When therapy gets intellectual, it is time to be careful. Intellectual conversation that is not concerned with concrete personal situation keeps therapy at arms length......psychotherapy is an emotional process, and intellectual adaptation without emotional involvement prevents improvement."

He uses many methods to induce the client to perform as prescribed, such as: advice, persuasion, logic, instruction, and commands.

Ellis' rational emotive psychotherapy approaches behavior and personality change by placing rather extreme emphasis on logic and reason. He feels that irrational, neurotic early learning persists because individuals persist in reinforcing themselves through constant self-reindoctrination in the learned, irrational, and illogical thinking. Ellis states: "For all practical purposes, the phrases and sentences that we keep telling ourselves frequently are or become our thoughts and emotions." (Ellis, in Patterson, 1966). This accounts for the fact that such behavior is persistent (reinforced), and not extinguished. The process of counseling, according to Ellis, is to cure unreason by reason. To do so, he goes through four steps in sequence: 1) The first step is to show the client his is illogical; to help him understand how he became so, and to indicate how his illogical, irrational thinking is related to his behavior and feelings. 2) He then demonstrates how the client's present thinking maintains (reinforces) his disturbance, and shows that it is his present irrational thinking which is responsible for his problem, and not prior influence. 3) The client is then helped to give up his present self-reindoctrination, and to yield up his irrational ideas. 4) This step is designed to assist the client in developing a rational philosophy of life, and to point out the main, general, irrational ideas prevalent in society.

Ellis' central technique is active, directive teaching with the goal of re-education. Patterson says: "The rational emotive counselor thus uses logic and reason, teaching, suggestion, persuasion, confrontation, reindoctrination, indoctrination, and prescription of behavior.....". Ellis encourages, cajoles, and sometimes insists that the client perform some action which is incompatible with his present irrational thinking and behavior.

Salter and Ellis are advocates of the more active type of counselor role in the counseling process. Counseling usually places emphasis on essentially two kinds of tasks of a prescriptive nature: Verbal behavior focusing on various aspects of the client's experience, such as the here-now, intrapersonal exploration, authority objects, etc.; and, motor behavior, representing non-verbal communication, as well as occupational information, new jobs, and/or new social situations which have motoric components, and which necessitate the learning of social skills.

The issue of prescriptions for the counseling process has been the object of research by behavioral psychologists. In every case reviewed where discriminative stimuli were employed, significant results were obtained. Most of the experimenters agreed that the more specific the subjects task, the more probable the desired response class was to occur and be reinforced (Truax, 1961; D'Zurilla, 1966; Krasner, 1958; McNair, 1957; Thoreson and Krumboltz, 1967).

Kanfer and Marston (1962) found that task specificity was positively related to the effectiveness of verbal conditioning. They suggested that when the task is not clear, other variables may interfere and contaminate the experimenter's attempts to reinforce the subjects for successfully accomplishing the task. Bandura (1961) has suggested that one difficulty in understanding the changes that occur in the course of psychotherapy is that the independent variable, i.e., the therapist's behavior, is often vaguely or only partially defined. In an effort to minimize or deny the therapist's directive influence on the patient, the therapist is typically depicted as a 'catalyst' who, in some mysterious way sets free positive adjustive patterns of behavior, or similar outcomes usually described in very general and highly socially desirable terms. Behaviorists' prescriptions for counseling have included much more specific directions concerning the methodology of the counselor.

ROLE PLAYING, IMITATION, AND MODELING

The topics in this heading have been extensively discussed in the literature and have been used successfully in counseling or instructional settings. No attempt will be made to present an exhaustive delineation of them.However, pertinent selections from the existing research or theoretical discussions will be cited. All of these techniques, either singularly or in some combination, can be utilized in various group counseling models.

One of the best discussions of imitation and modeling has been presented by Zenser (1966) who gives the following definition:

> 'Imitation' has most satisfactorily been defined as behavior emitted in response to a model which resembles that of the model. No satisfactory definition of imitation is available, however, to

> distinguish it from 'identification'. Both terms are so closely related that at times they have been used interchangeably.

Dollard and Miller (1941) have pointed out the characteristics of types of imitation important to counseling modles. In this paradigm, the subject learns a new response or way of responding, by copying the model's response in his presence, and being reinforced for doing so. This is the type of social imitation or model imitation used in many groups to shape the early "verbal" behavior of the group members toward increasing closer approximation of the desired kind of verbal interaction. Dollard and Miller have called this "matched dependent" behavior, and it applies to motor as well as verbal, behavior.

The counselor or therapist frequently provides the model for client behavior unwittingly, or incidentally, through cues of non-verbal nature, and/or by reinforcing successive approximations of values or behavior similar to that of the therapist. It is for this reason that it is important that counselors and co-counselors be consistent in the behaviors desired. Deviations, if too frequent, may result in the imitation of undesirable behavior by the client. Rosenthal (1955) found that these patients who were judged to have shown the greatest gain were those who changed their moral values in the areas of sex, aggression, and authority, toward a closer alignment with those of the therapist; and those judged unimproved values became less similar to the therapist.

Various kinds of imitative models have been used with varying degrees of success. Krumboltz and Thoreson (1964) used an edited tape in a model counseling paradigm with 192 eleventh grade pupils. They used the following introduction for the tape: "But before we get started, I thought you might be interested in hearing an edited tape of a boy who had a problem similar to yours. He was quite successful in his decision regarding his future, and he gave his permission to let other high school students listen to it". After this statement, a 15 minute tape was played of a model counseling session. Upon completion of this tape the counselor switched the recorder to record and said: "Tell me what you've been thinking about in regard to your future plans," whereby he then verbally andnon-verbally reinforced a specified class of verbal responses. They found that both reinforcement counseling and this model reinforcement produced more external information-seeking behavior than control procedures.

Zenser's (1966) report on two techniques used by the Aerospace Medical Research Laboratories in experiments also provide possible useful approaches. The first of these is called "self-confrontation", which is described as a method which: "provides an individual with a complete audio and visual record of his performance via sound motion picture film or videotape recording." Subjects were to play the role of an Air Force Captain. The reports of their findings indicate that individuals who "received self-confrontation training along with verbal critique of their performance, improved dramatically in their performance on the second trial of the role-playing." Zenser also reported that "subjects trained through self-confrontation did 94% as well after a two-week interlude as they did on the terminal acquisition trial of the original training sessions."

In this same report Zenser discusses another technique used for training purposes called imitation in which:

> A person views the performance of a model, rather than himself. It may be that seeing a videotape of a criterion performance by a model, in conjunction with role-playing exercises, is as effective in enhancing subsequent performance as in self-confrontation.

Zenser's review of the literature was thorough and he came to the following conclusions concerning studies with adults:

> 1) Both social and task reinforcement facilitates the elicitation of imitative behavior. There is some evidence, however, that a task reinforcer is more effective of the two.
> 2) Social sanctions have a controlling effect upon the elicitation of imitative behavior.
> 3) Imitation tends to generalize to similar situations.
> 4) The more competent the model the more likely it is that imitative behavior will be elicited.
> 5) Prior failure experiences and low self-esteem tend to be associated with greater imitative roles.
> 6) Skills in problem-solving acquired through imitation tend to be applied to a set-like fashion.
> 7) The question of what is learned when one learns through imitation is a question of major theoretical and practical importance, and remains to be answered.

Though the above reports indicate that reinforcement is essential to learning through model imitation or role-playing, there is some disagreement concerning this point. Bandura, Ross and Ross (1963) conducted a study of the effect of film-mediated aggression. Subjects viewed three models: (a) Real-life aggressive models, (b) The same models on film, (c) An aggressive cartoon character on film. The subjects were intentionally mildly frustrated after which the subjects from all three groups displayed significantly more aggression than control groups, and those who viewed non-aggressive models. However, the three experimental groups did not differ significantly. Other studies have obtained results where there was no reinforcement (Bandura and

Maschel, 1965; Berger, 1962).

Though the research isequivocal concerning reinforcement as an essential dimension in imitative learning, it would nevertheless seem to facilitate the performance of the desired behavior.

In a study designed to assess the effects of models, reinforcement, and their effects on moral judgments, Bandura and McDonald (1963) used three groups. The first group watched models expressing moral judgments counter to the groups, and were reinforced for adopting a position contrary to their own. Both groups exposed to models changed more than the operantly conditioned group which was the least effective in modifying the subjects' behavior. Bandura suggests that provision of models tends to facilitate a more rapid increment, or a more efficient approach to modification of social behaviors. He further suggests an approach which appears relevant to group counseling:

> Should one wish to produce discriminative social learning, the best procedure would undoubtedly be to set up actual or symbolic social situations, and repeatedly reward desired responses to these stimuli, while punishing undesirable responses, or letting these go unrewarded. (Bandura and Walters, 1963).

Hermatz (1967) argues against the use of reinforcement for increasing the frequency of responses in the subject's existing repertoire, and for the addition of new response classes to the subject's repertoire, and thus suggests that "role-playing is another method for investigation of new responses to old situations. Thus, the therapeutic procedures may not be new, but their application should be...."

The application of behavioral methodology to new behaviors is not a new concept, and the redefinition and/or application of behavioral methodology to other theoretical or precedural approaches is gaining impetus. One of the most emphatic statements concerning this possibility was made by Israel Sturm:

> To attempt a rapproachement is compelling for psychodramatists because learning theory is an incontrovertibly important and productive focus of recent psychology. Its theoretical uncertainty aside, learning theory has generated (1) new methods of teaching, by means of programmed texts and teaching machines (2) more intensive techniques for ideological 'brain-washing' (3) additional precision in psycho-pharmacological

and psychopathological research (4) B.F. Skinner's impressive attempts to describe all of human behavior and design a behavioristic utopia; and, perhaps most notable (5) behavior therapy itself. Regarding behavior therapy, some of its practitioners claim near 90% effectiveness for their techniques and, even more astounding, they report on hundreds of cases that have been followed up and which provide dramatists to follow up on Moreno's implications and explore the terms of theoretically unsettled--but empirically grounded--behavior therapy: The potential education and therapeutic effectiveness of 'behavioristic' psychodrama is impressive.

BEHAVIORAL DEFICITS

One of the assumptions which may be applicable to a large number of individuals is that many of the behaviors they manifest, such as avoidance of school, certain types of employment, meeting and talking to possible employers, and learning the motor and social skills essential for social and occupational upward movement are the consequence of previous experiences with teachers, parents, police, employees, and other authority figures. These experiences have been generally of a punishing nature with the consequence that escape or avoidance behaviors with their emotional correlates represent the stable repertoires or habitual responses.

These behavioral repertoires are not necessarily non-functional. They are merely non-functional if personal aspirations and social and occupational growth is incompatible with them. They may, in fact, be functional in the sub-culture to which the subject belongs. For these present repertoires were learned within the context of 'family within a sub-culture', and the conditions for establishment of their present behavior, attitudes, values, etc., their continuance and maintenance, are existent and operating in their home environment, and within their sub-culture.

The desirable behaviors cannot emerge and be positively reinforced. Avoidance of situations and individuals where adequate coping repertoires necessary for soical and personal growth can be attempted, practiced, and reinforced, results only in the maintenance of old, ineffective behaviors. Counseling in groups provides a set of conditions which can ameliorate this situation.

The prerequisite condition is the establishment of a climate within the group context that will make for a high degree of psychological safety. This can be accomplished through the means discussed in a prior part of this discussion. The important issue here is that because of prior conditions, the individual does not have in his behavioral repertoire, the necessary response. This may be due to a lack of social or occupational skills, or the parents' lack of ability to facilitate their learning. Gottlieb (1957) points out that the youth from a Job Corps population (N-1327) did indeed aspire to middle class values and goals, but had few adults in their lives who had the ability to assist them in goal clarification and goal attainment. Bandura (1961) discusses the fact that most counseling theories are based on the assumption that the client has an adequate behavioral repertoire of previously learned positive habits, but these adjustive habits are inhibited or that incompatible response patterns compete with them because of learned anxiety. He accounts for the prevalence of this assumption by pointing out that theories of personality and counseling practice have been developed primarily through work with oversocialized, neurotic individuals.

Bandura and Krumboltz (1966) suggest that many maladjustments may be because of behavioral deficits. Bandura states: "Such anti-social personalities are likely to present learning deficits; consequently, the goal of therapy is the acquisition of secondary motives and the development of internal restraint habits."

Krumboltz (1966) doesn't emphasize antisocial behavior as being the behavior which needs to be extinguished or internal restraints being shaped in, but suggests the problem is the failure to have learned adequate adjustive repertoires. He suggests counseling should develop new techniques for helping individuals learn new adjustive repertoires which seem relatively situationally specific.

The important issue then, is to define what behaviors are missing that the individual needs. In other words, his behavioral deficits.

One approach would be to select behavioral deficits which seem to be pervasive in a population. Communication is one such general objective and is perceived to be of primary importance. Its various aspects could be specifically designed into models. Other specified deficits which could be modified by particular models may include social skills, awareness of individuals potentials and aptitudes, modifications of self-concepts, etc.

It seems essential that a counseling situation be designed and implemented that will utilize the various techniques, procedures, and conditions that would enable them to learn the needed behaviors. Some of the necessary dimensions have been discussed, such as reinforcement, psychological safety, social imitations, role-playing, etc.

This is pertinent to the present national emphasis on social mobility, for one of the major problems of moving from a sub-culture to the middle-class culture is that some of the individuals have no behavioral repertoires which are functional in the larger middle class to which they aspire (Gottlieb, 1967), or with which they can relate in order to survive. Many of the behaviors they do have may be incompatible with behaviors they could profit from in the new and different setting.

The responsibility of counseling is to identify behavior deficits in terms of responses and behaviors needed to function and to obtain positive reinforcement in new situations for relating to individuals (such as employees, educators, peers from the middle class, etc.).

EXISTENTIAL GROUP COUNSELING

The way out of the human dilemma characterized by existential and neurotic anxiety and their contingent loneliness and alienation lies in increased openness to both anxieties and strengths in oneself and others. It takes courage to be open about oneself and one's reactions to others. This existential counseling group provides a structure which facilitates the emergence of the courage to explore oneself and to disclose oneself to others. The existential group derives its structure from a facilitator who is open and courageous in facing the anxieties and strengths latent or manifest in the group members and in himself.

> My brothers, seek counsel of one another, for therein lies the way out of error and futile repentance. The wisdom of the many is your shield against tyranny. For when we turn to one another for counsel we reduce the number of our enemies. (Gibran, 1958)

PHILOSOPHICAL ORIGINS

The theory and practice of existential group counseling derives primarily from the existential movement within psychology which was first applied to individual counseling. While some of the changes which lead to the formulations of existential psychology germinated from within American psychology, the major impetus for existential psychology was provided by European existential philosophy.

Existential philosophy does not consist of an integrated system of constructs concerning the nature of knowledge, values, being, purpose and design in nature or methaphysics. The accumulated body of existential thought has arisen from such divergent sources as the literature of Dostoevsky and Sartre, the religious writings of Pascal and Kierkegaard, and the philosophical writings of Jaspers, Heidegger, Bergson and Merleau-Ponty. Existentialists disagree on the existence of God, human freedom and,human ethics.

What the existential writers agree upon is (1) their disavowal of the adequacy of existing schools of philosophical thought, and (2) their focus upon a subject matter infrequently dealt with in traditional philosophy which they consider to be highly relevant and significant.

In its repudiation of traditional systems of philosophical thought, existentialism rejected the almost exclusive emphasis upon the essence of reality or the essential nature of reality as expressed in laws and principles. Not that laws and principles are invalid, but that they are symbolic abstractions comprising only a part of reality and not necessarily that part of reality most relevant to human existence. The existentialists accused the logical positivists of residing in a sterile world of symbolic representations and failing to deal with the nature of existence in a real world of freedom, anxiety and death. Kierkegaard satirized the almost ridiculous extremes to which the absent minded logical positivist went who became so removed from the reality of his own life that he woke up one morning to find himself dead.

Existentialists restored to philosophy its relevance to the concerns of everyday man as he resides in the world. They moved from the proliferation of laws of nature to attention to the full scope of everyday, lived experiences. Rather than laboring over the threads per square inch and the durability, they worked to portray the texture and visual aspects of the fabric of life.

The existential attention to experiential phenomena is exemplified in Dostoevsky's portrayal of human depravity, Sartre's attention to human choice, Kierkegaard's treatment of human passion and anxiety and Heidegger's and Jasper's pre-occupation with death, dread and failure. The movement of existential philosophers away from the mathematical and logical models of traditional philosophy resulted in a kinship between existential philosophers and certain psychologists who had long been addressing themselves to such aspects of human experience as choice, freedom, anxiety, and so on.

EXISTENTIAL PSYCHOLOGY

The existential psychological movement was not born solely of intercourse between European philosophy and American psychology but existed at least in its infancy prior to the impact of European existentialism upon American psychology. In fact, as Van Kaam points out, there is evidence that the American psychologist William James influenced the phenomenological movement which developed as an outgrowth of existential thought in Europe.

> One of the leading European existential phenomenologists, J. Linschoten, wrote a book, Towards a Phenomenology, with the subtitle, "The Psychology of William James."... In the introduction to this book, the diary of Husserl is quoted by Linschoten, where the father of European phenomenology admits the influence of the thought of this great American, James, on his own thinking.
>
> The book demonstrates in a well documented way that the hidden intention of James' thinking has been realized in the breakthrough of the new existential cultural awareness. (May, 1961)

Just as existential philosophy rejected the objective, abstracted approach to building models of reality as incomplete, so did existential psychology take exception to the strictly objective behaviorism of Watson and Skinner and the highly abstract components of Freudian psychoanalysis. Again, the validity of postulates concerning reinforcement contingencies, id-ego conflict and the like, is not denied, but the point is that the many-hued human being cannot be known through such abstractions. Rollo May says it well:

> There seems to be the following "law at work;" the more accurately and comprehensively you can describe a given mechanism, the more you lose the existing person. The more absolutely and completely you formulate the forces or drives, the more you are talking about abstractions and not the existing, living human being. (May, 1961)

This theme of May's is a cornerstone of existential thought. In speaking of the existentialist Henri Bergson, Barrett says,

> He was the first to insist on the insufficiency of the abstract intelligence to grasp the richness of experience, or the urgent and irreducible reality of time, and perhaps in the long run the most significant insight of all--the inner depth of the psychic life which cannot be measured by the quantitative methods of the physical sciences.... (Barrett, 1962)

The use of an analogy may clarify what May and Bergson are suggesting as the difference between the objective attention to essences and the existential concern with the whole of existence. Let us imagine a deciduous leaf that is mysteriously endowed with awareness. As we watch this particular leaf on an amber-hued autumn morning, a sudden gust of wind sweeps by, severing its stem from the mother branch, and it is wafted gently downward.

We could describe this event in two rather contrasting ways. If we were concerned about the essential characteristics or the essence of this event, we might assess the speed of the leaf, the distance from the ground, and attempt to predict the time lapse between "launch" from the tree and "touchdown" on the ground. This approach to the leaf falling phenomenon is based upon scientific principles which describe the structural characteristics of the leaf and its functional relationship with wind velocity, air density, temperature and so on. If we had enough data and sufficient explanatory laws we could predict and control the descent velocity and direction of the leaf. We could even study the descent of other leaves, gather more data, make hypotheses concerning further aspects of leaf falling phenomena, and set up experimental conditions to confirm or disconfirm these hypotheses.

The scientific description of leaf falling is a valid approach. It has obvious pragmatic value and has resulted in refrigerators, rocket engines, atom bombs, and electric back scratchers. Why, then, would the existential psychologist be dissatisfied with such an approach? The existential psychologist criticizes narrow scientism for selectively attending to only a part of the total phenomenon, and not necessarily the most important aspect.

Existential psychology says that the exclusively objective stance omits attention to two aspects of human phenomenology: (1) what it is like to be a leaf and to be falling, and (2) the observer's total experience of the event including his feelings, associations, hunches, aesthetic appreciations, etc.

Let us clarify this point by returning to the leaf analogy. If asked to describe its own experience of the phenomenon taking place, the leaf might tell of some queasy feelings as the umbilical stem began to loosen and a gasp, a gulp and a tingling mixture of excitement and apprehension as it began its giddy spiral descent earthward. We might learn of the heady pleasure of being thrust suddenly upward by an errant gust and the quiet serenity of the oceanic immersion in a viscous down draft. The imminent earth portends a finality, an end of the all too brief excursion through time and space. The mother soil enfolds the bit of vegetation in a vacuous cessation of experience and all that remains as the absurd tribute to a conscious venture through time and space is scattered bits of humus. Abstract representations of principles and laws do not portray the subtle textures and hues of the skein of life, how it feels to the skin or looks to the eye, but only its length, tensile strength and durability.

On the other hand, the observer-participant's experiences of the falling leaf which were not logical, scientific and mechanistically ordered, would be denied attention by a purely objective approach. The beauty of the leaf, our emotional response to its vivid traveling commentary and our despair at its seemingly meaningless demise would be contradictory to the detached, objective stance, essential to scientific description. The scientific approach necessitates a narrowed, incomplete perception of reality.

Existential psychology considers a sensitivity to the existential experience of the living organism and the expansion of the conscious awareness of the psychologist to be crucial concerns. Following are some of the major topics of concern in existential psychology.

ANXIETY

Anxiety does not exist as a physical entity but more nearly as a qualitative and quantitative feature of consciousness. There are observable gestures and verbal cues such as tics, trembling, stuttering and long silences which often, but not always, accompany anxiety. There are physiological counterparts revealed through changes in psychogalvanic skin response, heart rate, respiration and carbon dioxide saturation in the blood. However, these objective observations omit the experience of the living organism which is an essential consideration in studying anxiety and about which the existentialist is particularly concerned.

Webster defines anxiety as a "painful or apprehensive uneasiness of mind usually over impending or anticipated ill." (Webster, 1965) The American Psychiatric Association defines it as "a danger signal felt and perceived by the conscious portion of the personality. It is produced by a threat within the personality... with or without stimulation from... external situations." (American Psychiatric Association, 1952)

These definitions point out the two features most commonly identified with anxiety, viz., (1) a painful state of awareness, and (2) the absence of environmental conditions possessing real threat sufficient to trigger the painful, uneasy state of awareness. Anxiety is ordinarily differentiated from fear in that fear is triggered by a real threat to survival while anxiety may occur in the absence of any real threat.

Most of the traditional theories have identified anxiety primarily with neurotic or psychotic states. The existentialists have made an interesting distinction between neurotic and existential or ontological anxiety. While neurotic anxiety is learned, existential anxiety is not learned but is an integral part of being human. Existential anxiety arises when there is a real threat to physical or psychological maintenance or growth. Paul Tillich (1962) speaks of three types of existential anxiety: (1) the anxiety of fate and death, (2) the anxiety of emptiness or meaninglessness, and (3) the anxiety of guilt and condemnation.

ANXIETY OF FATE AND DEATH

The anxiety over fate and death occurs as a result of man's awareness of the inevitability of his eventual biological extinction and that he can do nothing to alter the inexorable course of his life cycle. Tillich raises the question: "Is there a courage to be, a courage to affirm oneself in spite of the threat against man's ontic self-affirmation?" The anxiety of fate and death is inherent in the organism and is first seen in the discomfort which the infant expresses when its survival is threatened. The early prototype of later anxiety of fate and death is in the birth trauma referred to by Freud, Rank, Sullivan and others.

Neurotic and existential anxiety are inextricably intertwined. The magnitude of the anxiety associated with death is directly related to the extent to which individual survival was threatened from early childhood. The individual who experienced numerous threats to his existence through the disapproval and implied threats of desertion conveyed by parents, develops more frequent and intense anxiety responses to non-threatening events which were very early associated with the true threat. These situations which arouse neurotic anxiety in turn arouse the existential anxiety over death and fate and counteract the courage to try, to grow, and to develop latent potential. This dilemma poses the classical "double-bind;" to act is to experience learned neurotic anxiety and existential anxiety of death, and not to act is to experience anxiety of guilt over not becoming what one potentially could.

An example of this would be a person who had an intense, irrational fear of speaking in public. Such a fear was undoubtedly learned in a context in which the individual's acceptability was questioned by those significant to his survival and thus anxiety over acceptance was associated with how he would be received as a speaker. He faces the dilemma of making public speeches and experiencing intense neurotic anxiety or refusing to speak and experiencing existential anxiety over the failure to achieve the potential of which he knows he is capable. Everyone experiences dilemmas of this sort to greater or lesser degrees in his life.

ANXIETY OF MEANINGLESSNESS

Tillich's notion of the anxiety of emptiness or meaninglessness has much in common with Erickson's concept of identity diffusion (1950). Both suggest that unless our existence has meaning, has purpose, includes values to which we can devote our energies, we doubt ourselves, our world and the value of existence. If there is nothing in life that really counts, then there is no way in which we can affirm ourselves or actualize our potential for growing, developing and differentiating our world. To refuse to act is to experience anxiety over not creating and participating in meaning, and to act in the face of meaninglessness is to risk participation in a tragic charade. "In order to avoid the risk of asking and doubting he (man) surrenders the right to ask and to doubt." (Tillich, 1952)

The existential anxiety over the possibility that life is absurd is also intertwined with neurotic anxiety. The child builds his world out of his active discovery of meanings. If his sallies at exploration are met by disapproval, if his reality is constantly questioned, the seat of meaning does not reside within but he must always check with significant others to reassure himself that he can believe the deliverances of his senses.

Let us imagine that a young mother has been doing her housework while her eleven month old son has pretty well exhausted his exploration of the limited confines of his playpen. He is restless and momma needs a break. She bundles him up under one arm, a magazine and a blanket under the other and walks through the back door into the warm April sunshine. She places the blanket on the grass, the child in the middle of the blanket, sinks down on the nearby porch steps and is immediately absorbed in her "True Love and Romance." Moments later, glancing up from her reading, she notices that he has crawled to the edge of the blanket, grabbed a large handful of the juicy green grass and is about to ingest it. Being appropriately fastidious, momma jumps to her feet, runs to the edge of the blanket, grasps a pudgy wrist between the thumb and index finger of her left hand and with her free hand brushes the alien substance from him grasp, all the while saying, "No, No. Mustn't, mustn't. Dirty, dirty. Make baby sick, sick." Imagine this scene repeating itself several times, whereupon the mother, in exasperation, picks up the boy, blanket and "True Love and Romance" and stamps scowling back into the house. Let's examine this little vignette and see what it may have meant in the life of this child. If this pattern of interaction were repeated often enough the boy would probably learn, first of all, that he cannot trust his impulses. He might learn to tell himself, "They are bad because they get me into trouble with mother. When I feel these impulses to explore, I must suppress them becuase they will invoke disapproval from those important people around me whose approval I need so desperately." He may learn that before he tries to investigate something, he must check to find out if it is all right to do so. When he gets to school he may always need to wait for specific instructions before proceeding and then do so hesitatingly. He may doubt that he can find answers himself and thus choose to depend upon the teacher to tell him.

The learned anxiety which he experiences over his attempts to construct meaning leaves him reluctant to explore and results in his world being limited, poorly differentiated, and both his own ability to construct meaning and the inherent meaning in the world highly doubtful. This is the individual who grows up lacking a personal identity, experiencing exaggerated existential anxiety over meaninglessness and a stultified courage to construct meaning and identify.

THE ANXIETY OF GUILT AND CONDEMNATION

The anxiety of guilt and condemnation is the existential anxiety over not becoming that which one has the potential to become. The existential anxiety over death or survival and over meaninglessness work in opposition to the courage to assert and develope one's potential and, thus, intensify the anxiety of guilt and condemnation. If one's world becomes circumscribed in an effort to avoid survival threats or to avoid awarenesses that threaten the safe, impoverished meanings of a restricted perceptual world, the individual experiences anxiety over playing it so safe and failing to grow and develop. The term "quiet desperation," the state in which many seem to eke out their existences, embodies the anxiety of guilt and condemnation.

According to existential thought, anxiety is experienced over not developing one's potential. However, the existential anxiety of guilt is woven into the neurotic anxiety over not being perfect. The anxiety over the failure to live up to what others expect is often anxiety-provoking because if we don't live up to their expectations we run the risk of rejection which has a historical link with a survival threat. This leads to an experienced confusion over behavior which is one's effort to become one's potential and behavior directed toward living up to an "idealized image," or an "ideal self" which is an introjection of social expections. People who experience confusion over that behavior which is self-developmental and the striving behavior which is aimed at allaying the anxiety associated with rejection are said to have a diffuse identity, or even more simply, they don't know what they want. At one time they act in a way that enhances their potential and at another time they act to forestall the possibility of being rejected. The act of self-affirmation, or becoming one's potential, is the only way to reduce the anxiety of guilt and condemnation. Self-affirmation is inner directed behavior; behavior which is consistent with the fullest development of the organism. Neurotic striving is outer directed behavior. It is achieving in order to ward off anxiety and organized to follow prescription imposed by others. While such neurotic striving results in knowing more and becoming more skillful, it is done for others and always has the quality of being dispossessed by the person. That is, even stellar accomplishments cannot be owned by the individual and are not self enhancing because the basis is anxiety avoidance and self-denial rather than self-enhancement. Anxiety is inevitable in such an instance and typically the individual vascillates between experiencing existential anxiety of guilt and condemnation while striving to meet the wishes of others, and neurotic anxiety over rejection when asserting himself contrary to the expectations of others. The resolution of this dilemma is the reduction of neurotic anxiety and progressively behaving more in accordance with the "real self."

LONELINESS AND ALIENATION

Existential writings are replete with discussions of modern man's loneliness and alienation. Loneliness and alienation are parts of his existence. In "Fear, Trembling and the Sickness Unto Death" Kierkegaard (1954) points out the loneliness of the fatalist who is alienated from his personal potential for becoming by his implicit assumption that he cannot change things or of the loneliness of fantasizing on what might potentially be and thus divorcing himself from the limitations of reality.

From (1947) in similar fashion points out the dialectical nature of man's loneliness in accepting his individual responsibility for himself as opposed to the alienation from self and others which accompanies the "escape from freedom" which is the refusal to accept the loneliness of self-determination.

Barrett captures the existential and neurotic loneliness of modern man when he speaks as follows:

> He has come to see himself as an outsider even within his own human society. He is terribly alienated: a stranger to God, to nature, and to the gigantic social apparatus that supplies his material wants. But the worst and final form of alienation toward which the others tend, is man's alienation from his own self. In a society that requires of man only that he perform competently his own social function, man becomes identified with this function, and the rest of his being is allowed to subsist as best it can...usually to be dropped below the surface of consciousness and forgotten. (Barrett, 1962)

Man's loneliness and alienation from others and from himself is intimately associated with the presence of both existential and neurotic anxiety in his life. The alienation from others results from his response to their threat to his effort to grow, develop and make meaning of his world. A child often learns very early in life that many of his thoughts, feelings, and actions are disapproved by significant people in his life. This disapproval poses a threat to his survival, arousing existential anxiety. A natural defense against this anxiety is to suppress feelings, emotions and cease actions which are followed by threat. This guarded withdrawal of feelings, emotions and actions creates distance and alienation from others. A secondary result of threat is the repression, the attempted exclusion from consciousness, of unacceptable thoughts, feelings and behaviors resulting in self-alienation, a diffuse identity, an individual who does not know who he is. As Rogers suggests (1961), an individual of contrasts who one time acts on his basic actualizing tendencies for which he experiences neurotic anxiety and who another time acts as others would like, denying existing thoughts and feelings, consequently experiences the existential anxiety over a lack of courage and over being compromised.

The existential phenomena considered up to this point have been negative, pessimistic aspects of human existence, more often identified with European existentialism. Allport identified the European despair and contrasting American hope in the following manner:

> When life is a hard struggle for existence, and when, as in war-torn Europe, there appears to be "no exit" (Sartre), then personalities do in fact grow tense and develop a heavier sense of duty than of hope. In America, on the contrary, where the search for a rich, full life suffers fewer impediments, we expect to find a more open, gregarious, trusting type of personality. This expectation is reflected in the prevailing optimism of American psychotherapy which includes not only neo-psychoanalytic conceptions of a "productive personality" but also "client centered therapy" and such flourishing new movements as "pastoral counseling" and "guidance." (Allport, 1955)

Let us turn our attention to two hopeful aspects of human existence, courage and openness.

COURAGE

Courage has been a topic of interest to existential philosophers and psychologists, but more than that it has been lived in their lives and has featured the movement from its inception. As Kaufmann says,

> The refusal to belong to any school of thought, the repudiation of the adequacy of any body of beliefs whatever, and especially of systems, and a marked dissatisfaction with traditional philosophy as superficial, academic, and remote from life--that is the heart of existentialism. (Kaufmann, 1956)

The movement which began as a courageous intellectual and emotional protest against the academic establishment reached its apex in the lives of

European existentialists who daily confronted their demise in war-torn Europe as is so articulately portrayed in Frankl's "From Death Camp to Existentialism."

Most any man, woman or child on the street can tell you about courage. It's what one has who proceeds into battle at the risk of death or injury. It's what the boy next door has when he retrives his baseball from the fenced-in yard impounding a Doberman Pinscher. It is what most clients wish more of who seek out the services of a psychotherapist. Courage is characterized in existential writings as that quality which enables one to act in the face of existential and neurotic anxiety. Everyone has courage. The human individual is born with courage. This courage which is inherent in human nature has been called "elan vital" by Bergson, the self-actualizing principle by Maslow, Rogers and others, and is the biological characteristic of all living organisms that is the impulse or "will" to live. This forms the foundation for the courage to be oneself. Existential psychologists propose not only a built-in propensity for the human organism to survive, grow and enhance itself physically, but to survive, grow and enhance itself psychologically. It is the fortitude to be what one is today and to be more differentiated, more able and more autonomous tomorrow. The problem of human existence is that this self-actualizing tendency exists in a being that is conscious of itself, its eventual cessation of being, the possibility that the world is meaningless, and the great responsibility for full development with the ever present possibility that all potential may not be realized.

Maslow, Rogers, Allport and others see the human being as possessing a basic psychological courage to grow and become more of his psychological potential for knowing, loving and creating. However, each of them recognizes the influence of the childhood environment upon the individual's courage to be and conceive of counseling and psychotherapy as restoring the courage to become all that one potentially is in spite of the presence of existential and neurotic anxiety.

The courage to face death, meaninglessness and potential failure exists inherently and is fostered if the infant's survival is not threatened, if it maintains a confidence in its ability to construct meanings and if it has opportunities for realizing its potential. Courage is fostered in a setting of love and the responsibility for meeting realistic demands in the world.

The genesis of the loss of courage is in early life situations which frequently arouse existential anxiety over biological self-preservation. When the infant is "being," is exploring itself or its world, is crying in response to pain or is engaging in any number of activities related to what Rogers refers to as the "innate, actualizing tendecies" and is punished by parental withdrawal or aggression, a conflict is set up. The self-actualizing tendencies can be discontinued or the perceived threat to survival can be encountered. While there seem to be some individual differences in the tendency to actualize or become (Freud, vital energy; Sheldon, inborn differences in assertiveness), the tendency is for the infant to cease the unacceptable self-actualizing behaviors in order to reduce the existential anxiety over threats to survival. If such circumstances are frequent, the price of survival is the acquisition of neurotic anxiety generalized to harmless people, loud noises, etc., existential anxiety over meaninglessness and self-condemnation. The inherent courage to survive takes precedence over and reduces the courage to grow, develop, create, construct meanings, and exist fully in a psychological sense.

Existential counseling sets about to increase the courage to be what one potentially is through reducing neurotic anxiety and confronting exitential anxieties.

OPENNESS

The great plea of existentialism has been for openness, for a broadening of the boundaries of perceived reality beyond the limiting confines of scientific abstractions, beyond the distortions of romanticism to the actual scope and substance of what is real.

The practical implications of this in psychological practice are that the data considered appropriate for study go beyond the clearly identifiable behaviors preferred by behavioral psychology and include subtle, non-verbal cues and in particular the verbal report of the subject being studied, of his conscious awareness, his feelings about himself and others, etc.

From its beginnings the existential movement insisted upon an awareness and eximanation of all aspects of human existence. Dostoevsky did so in his literature. He portrayed the full range of conscious experience of his characters. He wrote of that which is clearly symbolized in consciousness, that which is vaguely symbolized and that which is an internal contradiction. He displays the rich textured fabirc of self-deceit and deceit of others which Frued analyzed scientifically in his theory of the unconscious and the defense mechanisms.

> The more conscious I was of goodness and of all that was "good and beautiful," the more deeply I sank into my mire and the more ready I was to sink into it altogether. But the chief point was that all this was, as it were, not accidental in me, but as though it were bound to be so. It was as though it were my most normal condition, and not in the least disease or depravity, so that at last all desire in me to struggle against this depravity passed. It ended by my almost believing (perhaps actually believing) that this was perhaps my normal condition. But at first,

> in the beginning, what agonies I endured in that struggle. I did not believe it was the same with other people, and all my life I hid this fact about myself as a secret. (Garnett, 1956)

Existentialism favors an openness to experience which takes in the whole of life. "Naturally, the attempt to see the whole or integral man, in place of the rational or epistemological fragment of him, involves our taking a a look at some unpleasant things.....death, anxiety, guilt, fear and trembling, and despair." (Barrett, 1962)

In their efforts to go beyond science and encompass the whole of existence, the existential writers seem sometimes to overemphasize the morbid, pessimistic aspects of life. It may be that the existential writers have had more firsthand acquaintance with existential and neurotic anxiety in their own lives and have lived in times of cultural despair such as was true of the Europeans during and following the second world war.

THE OPEN BEHAVIORAL SCIENTIST

Existential psychology stresses the importance of expanding the psychologist's orientation beyond scientific thought and objectivity to sensing emotional nuances in people and involvement with people. May effectively contrasts the scientific and existential orientations in commenting on Freud's and Kierkegaard's accounts of anxiety.

> Freud was writing on the technical level, where his genius was supreme; perhaps more than any man up to his time, he knew about anxiety. Kierkegaard, a genius of a different order, was writing on the existential, ontological level; he knew anxiety. (May, 1961)

It would be a misconstrual to interpret this as an indictment of Freud because he did not write as if he knew anxiety any more than May meant to upbraid Kierkegaard for not writing more precisely about the anatomy of anxiety. May is pointing out the partiality of Freud's objective approach, its distance from the existential experience of anxiety.

Existential thought is characterized by an openness, an expansion of conscious awareness in contrast to the narrow focus of science to which Barrett refers.

> Positivist man is a curious creature who dwells in the tiny island of light composed of what he finds scientifically meaningful, while the whole surrounding area in which men live day by day and have their dealings

> with other men is consigned to the outer darkness of the meaningless. (Barrett, 1962)

In the words of the psychologist Rogers, "This tunnel vision is not adequate to the whole range of human phenomena." The existential psychologist opens himself to the full spectrum of human behavior, he attempts to see it as it is and not limit it by narrowed attention to reinforcers, defense mechanisms or other preconceived categories. Not only is he open to the totality of the behavior before him but he is also open to the wide range of sensations which he experiences as the observer of this totality. He is able to comment upon what is observed and can also comment upon his own internal reactions to what he observes.

Maslow sees the open attitude as being essential to an adequate description of reality so essential to scientific inquiry,

> ...when the structure of the person or object is difficult, subtle, and not obvious.... Especially then must the perceiver have respect for the nature of the object. Perception must then be gentle, delicate, unintruding, undemanding, able to fit itself passively to the nature of things as water gently soaks into crevices....
>
> The most efficient way to perceive the intrinsic nature of the world is to be more receptive than active determined as much as possible by the intrinsic organization of that which is perceived and as little as possible by the nature of the perceiver.... Do we see the real, concrete world or do we see our own system of rubrics, motives, expectations and abstractions which we have projected onto the real world? Or, to put it very bluntly, do we see or are we blind? (Maslow, 1962)

THE OPEN THERAPIST

Rogers poignantly portrays his own personal preference for openness in counseling and his experience concerning its impact upon therapeutic growth.

> I believe I know why it is satisfying to me to hear someone. When I really hear someone, it puts me in touch with him, it enriches my life... When I say that I enjoy hearing someone I mean, of course, hearing deeply. I mean that I hear the words, the thoughts, the feeling tone, the personal meaning, even the meaning that is below the conscious intent of the speaker. Sometimes, too, in a message which superficially was not very important, I hear a deep human cry, a

> "silent screaming," that lies buried and unknown far below the surface of the person. So I have learned to ask myself, can I hear the sounds and sense the shape of this other person's world?.... I think perhaps this has been a long standing characteristic of mine. I can remember this in my early grammar school days. A child would ask the teacher a question and the teacher would give a perfectly good answer to a completely different question. A feeling of pain and distress would always strike me. My reaction was, "But you didn't hear him!" I felt a sort of childish despair at the lack of communication which was (and is) so common... I have often noticed both in therapy and in groups, that the more deeply I can hear the meanings of this person the more there is that happens. One thing I have come to look upon as almost universal is that when a person realizes he has been deeply heard, there is a moistness in his eyes. I think in some real sense he is weeping for joy. It is as though he were saying, "Thank God, somebody heard me. Someone knows what it's like to be me." In such moments I have the fantasy of a prisoner in a dungeon, tapping out day by day a Morse code message, "Does anybody hear me? Is there anybody there? Can anyone hear me?" And finally, one day he hears some faint tapping which spells out "Yes." By that one simple response he is released from his loneliness, he has become a human being again. There are many, many people living in private dungeons today, people who give no evidence of it whatever on the outside, where you have to listen very sharply to hear the faint messages from the dungeons. (Rogers, 1967)

A recurrent theme in the writings of existential therapists is the stress upon the importance of the therapists' openness to all of the reality of the client sitting across from him, for it is only through being willing to openly consider all aspects of the client that therapeutic behavior will be based upon the total reality of the client rather than a part or a distortion, that he will support the client's courage to look at all of his reality, and will serve as a model to the client of how to be in the world.

THE OPEN CLIENT

In The Transparent Self: Openness, Effectiveness and Health Jourard says:

> I have little doubt that self-disclosure is a crucial variable

> in the broad field of interpersonal relationship....
>
> Would it be too arbitrary an assumption to propose that people become clients because they do not disclose themselves in some optimal degree to the people in their life? I have come to believe that it is not communication per se which is fouled up in the mentally ill. Rather it is a foul up in the process of knowing others, and of becoming known by others. (Jourard, 1964)

As was mentioned earlier in this chapter, it is the failure to know others, to know oneself and to be known by others that results in the loneliness and self-alienation so characteristic of our day. This fear of disclosure that has its origin in early fears of rejection by significant others leads to alienation from self and others and can be overcome only by being courageously open with self and others.

This need for openness and disclosure has long been acknowledged. Freud saw the necessity for reducing self-alienation by discovering repressed parts of oneself that had been heretofore denied. Ellis (1961) stresses the need for identifying irrational fears which have not been acknowledged and understanding their irrational nature. The existential psychologist sees the necessity for not only discovering parts of oneself that were hidden in the past or for identifying irrational ideas but for learning to courageously develop an open way of experiencing the world so that acceptance of self and disclosure to others becomes a way of life.

THE HUMAN PHENOMENA

Just as existential philosophy repudiated the objective attention to laws and principles of reality which reduce philosophy's relevance to the vital life concerns of man, so existential psychology has taken exception to behavioral psychology and has favored attention to how man feels, thinks, and in general experiences his being in the world. Consequently, both existential philosophy and psychology are sparse in their attention to bits and pieces of behavior and their governing laws and favor the study of such global phenomena as anxiety, loneliness, courage and openness.

There are two interrelated types of anxiety, viz., existential and neurotic. Existential anxiety is not learned but is one of the givens in existence. It is an inherent uneasy, painful feeling related to death, lack of meaning, and the failure to develop one's potential. Neurotic anxiety is learned in conjunction with existential anxiety but is an uneasy feeling in response to situations which do not pose a real threat to survival, meaning or development of one's potential. In neurotic anxiety the individual learns to associate any number of harmless objects, thoughts and feelings with threats to physical and psychological existence, to experience uneasiness in their presence and to escape or avoid them.

Alienation and loneliness are a part of human existence in that, ultimately, man is responsible for his own actions, which derive from his freedom of choice. This sense of individual, separate responsibility can leave him with a sense of aloneness from others and from nature. Alienation is intensified by neurotic anxiety over pleasing others which leaves him feeling unacceptable to himself and others. His avoidance of the anxiety over his unacceptable thoughts, feelings and actions often leaves him separated from parts of himself and from others.

Everyone is born with courage. In its most primitive form it is the built-in biological energy directed toward survival. While there may be ontogenetic differences in courage, it is fostered in an environment of love and the encouragement of responsibility and is stultified in an environment of conditional acceptance which breeds neurotic anxiety.

An openness to the totality of internal and external reality has been a cornerstone of existentialism. Existential psychology has consistently made a case for the importance of openness in the behavioral scientist and the practicing counselor. A more complete science and a more effective psychotherapy is seen as contingent upon the consideration of the whole of human phenomena rather than atomistic elements or objective abstractions. Furthermore, the road to health for the client is the courage to be open in considering those thoughts, feelings and objects which trigger neurotic and existential anxiety.

EXISTENTIAL COUNSELING IN GROUPS

Haigh (1968) tells, graphically, of his experience as an existential group counselor.

> I want to tell you about the most vivid experience I have had in the past week as a psychotherapist. On Tuesday night I met with a group that has been meeting together for over a year. We had a very exciting session. I found myself very much involved in what was happening. Each person would express himself in a way which was related to how the previous person had expressed himself. The group itself became increasingly intense as the meeting moved on. An incident from the previous week was a partial triggering for what happened Tuesday night. I would like to briefly report this incident.

John, one of the group members, told us at one point in the meeting he felt isolated. He somehow felt cut off from everybody, and didn't know how to get back in touch. He thought physically touching might help him get back in touch, but he didn't know. I suggested a technique for us to try. We stood in a circle with John in the center, and we passed his body around from person to person. After a while he moved out, and someone else moved in. Each member, in turn, had a chance to be passed around until Diana was the only group member left. She said she didn't want to be passed around in this way. She said, "Do you know why I don't want to be passed around in this way?" We did want to know why. She said she didn't want Tom to touch her breasts. At this point Tom collapsed. His head went down, his eyes closed, and he looked as if someone were beating on him. I asked him how he was feeling and he said, "Rejected." He said it with hurt and with anger. We talked with him about what was going on in him. His reaction was as if he had been totally wiped out. How come? We began to find together that he has always implicitly made the assumption in regard to women that he has the right to get what he wants, when he wants to. When he was told, in effect, don't do this to me, by Diana, his reaction was rejection.

This particular incident reflected the beginning for this group in dealing with the whole area of sexuality. They had met for over a year and had almost ignored sexuality.

Now I want to tell you what happened last Tuesday, a week after the incident I've just described. At the beginning of the meeting I suggested the sharing of fantasy as a technique for getting started. I suggested that each person simply tell a fantasy. Just put it out there. No reaction. No comment. The next person tell a fantasy, and let that be that.

We did that. When my turn came, I told a sexual fantasy, to which Diana reacted very strongly. She attacked me. She told me I was a dirty old man and that I was trying to lead the group astray; I was trying to get them to be intimate with each other. I looked at her, and she was sitting between me and the light source. She was silhouetted and she looked dark and evil. I told her she looked like an evil witch who was trying to take away my sexuality. I told her I was scared. I became angry as I said this, and I expressed my anger toward her in calling her an evil witch. She fired back at me and also began to cry. It wasn't clear which way she was going to turn toward--continuing the fight with me, or in the direction of collapse and tears. At that point John got up, went over to Diana and put his arms around her. She collapsed into tears, said she felt weak, and wanted to leave. When she felt weak and helpless, my anger changed to supportiveness. John told me he was fighting me. He said he didn't like the way I was tearing her apart and that I was using my role of therapist to unfair advantage, manipulating her and causing her to collapse. I told him he was like a blanket over her, smothering her; encouraging her weakness and ignoring her strength. He didn't see the strength with which she was fighting me; he only saw the weakness and he brought out the weakness and was denying the strength that was in her. Then he had the feeling that I had defeated him, and he felt that he should not have gone over to Diana. At this point I was annoyed with him. I told him: "I'm glad you went over there. The fact that you went over there made it more complicated and more interesting. But you are hung up on this authority thing."

Mary came in at this point and said, "We are all hung up on this authority thing. We don't let you participate. Whenever you say anything; whenever you give anything; we always take it as saying something about what we should do in this room." Then Mary went on to say that she was tired of this thing between John and me over Diana. She said she wanted to organize the rest of the group against us. She was very strong when she said that; very clear, and very direct. On of the men sitting along side of her said that he felt warm toward her. He pulled Mary toward him and the two of them held hands. At this point Tom said that when Mary and Edward held hands he felt good about it. He felt that somehow he was shut out of the holding between John and Diana, but was not excluded from the holding between Mary and Edward.

This is about half way through the meeting, and it kept building as time went on, and the people were responding

> directly out of their emotional involvement with each other. I saw two of the people the next morning. The structure provided by me for the group was for me to stay with them for an hour and a half and for them to stay on for another hour or so without me. I don't know how long they stayed that night, but one of them told me she had stayed up until 4:30. The other one said she had been up until 5:00 a.m. They had been that involved, and it took that long to relax, to go to sleep. They told me the group had become creativity-oriented after I left. Tom had done some sketching in the group. Another woman in the group said she wanted to go back to painting again, even though she hadn't done it for a number of years. They were talking about organizing a painting class. Another person in the group talked about wanting to write again. It seemed as if this coherent interflow of the group had begun to release energy sources and might, perhaps, be a release for creative energy in the people. It remains to be seen what is going to happen, and how they carry through.

This brief account of a small segment in the life of an existential group has the meandering, contradictory, depraved, loving, yet meaningful quality of a Dostoevsky novel. The alienation of John, the distrust and suspicion of Diana, the pouting, dejected hurt and anger of Tom, the anxiety, courage and openness of the leader, and the subsequent openness and creativity of the entire group poignantly portray the courage in a group to face squarely their own and others' feelings and the releasing, self-actualizing quality of this openness.

The key to therapeutic growth in an existential group is the degree of openness which the individual members have. "Alienated man is not known by his fellows, he does not know himself, and he doesn't know his fellows. Self-disclosure appears to be the one means, perhaps the most direct, by which self-alienation is transformed into self-realization." (Mowrer, 1964) The openness, so vital to self-realization, is with respect to such significant aspects as: (1) confronting and sharing their own thoughts and feelings which create neurotic or existential anxiety, (2) confronting and responding to behaviors in other group members which arouse anxiety, and (3) confronting and responding to the potential for growth, for being responsible.

SELF-DISCLOSURE

Disclosure of threatening thoughts and feelings.

As with Dostoevsky's character in "Notes from Underground" many people do not believe that others have negative thoughts and feelings and consequently hide facts about themselves as a secret. These hidden thoughts, so carefully guarded, are the source of alienation. They became fractionated, isolated islands when we learned to deny them in order to court the pleasure of important people in our lives who found them objectionable. They continue to be avoided and only vaguely symbolized because to admit of them is to feel unacceptable to self and others. They cease to be fragmented and are integrated as parts of ourselves when we can acknowledge them, share them with others and learn (1) that many of our most feared private thoughts are experienced by others, and (2) that others are not necessarily stunned, repulsed or rejecting of us upon our disclosure.

Rather than hiding his loneliness, as he was accustomed, John shared his feeling of loneliness and vulnerability. The group immediately responded by reaching out to him and by offering him an opportunity to reach out to them. Had he not shared this rather vulnerable feeling of his, he would not have learned that others wished to reach out to him and have him reach back.

However, self-disclosure is not as easy as it seems for it takes courage. It takes courage because what is being shared is frightening. This is what differentiates it from the idle, "Can you top this?" swapping of adolescent escapades or sharing of risque thoughts in the locker room. Such swapping is often exaggerated and even when it isn't, it is not a sharing of personal feelings that seem unacceptable to oneself or others. On the contrary, it is the sharing of experiences which are status enhancing.

Berzon (1965) discusses the difference between a superficial exploration of self, on the one hand, denoted by an "aloof, superficial manner," the presentation of " 'facts' about public aspects" of oneself, the rehearsing of a role or playing patient to the group, and, on the other hand, the deeply moving therapeutic encounter in which individuals explore "their relationships, their fears, their turmoil, and their life-choices, and they are doing so with emotional proximity to the material."

For example, a male member of a group may be able to share his sexual feelings for a woman member but may be unable to admit his use of sexual seduction to continually ward off facing the possibility that he is not sexually attractive to all women. Tom may have shared with the group his successes with women but apparently had not told them of his great disappointment over not getting his own way. When Diana forced this realization upon him, he wilted. Through learning that he wilted but was not destroyed, Tom may find it less necessary to avoid the possibility of rejection in the future.

Frequently group members will show their anger as a display of openness, when the anger comes rather convincingly but easily. Often the anger is a secondary reaction to fear and the feeling which takes courage to express is the fear; a fear of being rejected, of not being acceptable to oneself or of not getting one's own way.

The self-disclosure in a group which is personally developmental is the disclosure which is difficult to make. A group participant may find the courage to unveil parts of himself because the group is especially gentle at the time, because he is goaded into doing so by being confronted by another member or because another member shows the courage and serves as a model for him. The modeling may occur in a group member or in the leader such as Haigh's sharing of his fear and anger which he directed toward Diana. There is a kind of contagion of courage at times like this in the existential group.

Self-disclosure can lead not only to learning that others have similar feelings, and that one is not rejected by others but this kind of sharing can serve as a reality test concerning the accuracy of certain private thoughts. Tom's private idea that he had the right to get what he wanted when he wanted was quickly dispelled by Diana's reaction. Sometimes such negative self-referent thoughts are confirmed, sometimes they are denied when reality tested with the group. Group members may feel that they have nothing to contribute which would be of interest to the group only to discover that the group becomes intensely interested in them.

Through self-disclosure those sealed off, fragmented segments of awareness which are usually not acknowledged to self and seldom if ever known to others become less fearsom, lose their power to repel conscious attention and do not serve to maintain the conscious alienation from parts of self which the individual strives to integrate into a unified identity.

When fearful thoughts about self disappear, possibilities open up, awareness expands, things are seen as they really are, creativity is enriched, as was the case in Haigh's group. The existential anxiety over meaninglessness reduces as meanings become clearer, existential anxiety over the failure to become reduces for knowing is becoming, and the anxiety over fate and death is decreased, because early-learned survival threats are decreased. To live and become is to fear death less, and to see shades and changes in meaning is to regard fate as less arbitrary.

DISCLOSURE OF POSITIVE THOUGHTS AND FEELINGS

One of the objectives of existential group counseling is to become aware of and share feelings which are frightening. This might be referred to as the anxiety-reduction function of existential group counseling. Another objective is the disclosure of positive thoughts and feelings. Anxiety-reduction often precedes the experiencing and sharing of positive or growth enhancing feelings and thoughts. An example may help clarify this point. If David, aged twelve, is afraid of dogs, the reduction of his fear opens up all kinds of possibilities for he can now choose whether to be with dogs. However, his loss of fear of dogs does not mean that he knows about dogs or now knows how to play with them. The existential group may dispel the fear of people, but may also provide an opportunity for learning more about what people are like and more effective behaviors in relating to them. The learning of more personally satisfying behaviors which are socially effective is particularly essential among the poverty youth.

Another outcome of the existential group is the opportunity it provides for highly positive shared experiences. There are times, like the creative aftermath in Haigh's group, when there is a blending together of the fragments of the group in a deeply moving experience, a group "peak experience." Farson (1966) goes so far as to suggest that since the incontrovertible evidence on change due to therapy is so meagre, one of the major justifications for group counseling is the "moments of humanness" which it provides.

DISCLOSURE OF REACTIONS TOWARD OTHERS

One can explore one's own feelings in a group and fail to achieve open communication with others. If existential and neurotic anxiety are to be reduced, one must be courageous enough to reveal feelings toward other group members. Much of the alienation in contemporary society is a product of or at least a counterpart of the lack of direct, intense, emotional and meaningful communication. The "hello-goodbye" interchange is characteristic of much of our communication. It is a superficial, detached brushing of the surfaces of two organisms who do not really count for each other. It is a mutual complicity to maintain distance. I see this superficial contact as a cultural and individual invention designed to avoid existential anxiety over death and fate and becoming what one potentially is. It serves, however, to provide only the thinnest of veneers to overlay the anxiety which filters through in use of drugs, drink, escape recreations, etc. When the veneer wears thin or cracks the underlying anxiety appears full force in depression, suicide, psychosomatic illness and neurotic and psychotic episodes.

The acrid despair of social alienation among certain minority segments of our society is now breaking into the open in the form of aggression and demands. The despair has been there in a quietly desperate, smouldering way but now it is an open flame, undoubtedly fanned by slight gusts of hope. One way to decrease the destructive, aggressive derivative of despair in the poverty segment, and in particular the youth, is to encourage open dialogue with the favored segments of society, assist them to fully develop their skills, increase their understanding of their feelings in the dilemma they face and find personally satisfying ways of actualizing their potential in work and play.

Superficial communication allays existential anxiety by preventing negative communication which might set up the possibility of rejection leading to neurotic or existential anxiety over fate and death. The childish association of rejection with loss of support and a threat to survival may be carried over into adult communication and result in avoiding rejection at all costs. The polite condescending-obsequious dialogue which has historically taken place between minority and majority segments of our society is an example of complicity at the society level to avoid anxiety.

The existential anxiety over "becoming my potential" is also allayed by the "hello-goodbye" communication. If I show love and affection for someone it poses a threat from two sides. First, they may make continued demands that I will feel compelled to meet, and, secondly, my individuality may be lost in my continued efforts to provide them with the "pleasure and comfort" of my love and understanding. Many people seem reluctant to show any love because of the continuing responsibility to give love which they see a loving act entailing.

The second type of threat posed in the giving of love and understanding is that it reveals that "I can love." "I can understand," " I can be adult and, if I can once, then I am fully aware of falling short of my potential when I don't." The giving of love and understanding asserts a strength, a readiness to not need as much dependence, a giving up of some of the narcissistic, self-centered needs.

It is through responding to others in an existential group that one can overcome the intense fear of being rejected and can learn to give love and affection without being smothered and losing individuality. In Haigh's existential group, Tom learned that it was not his right to get "what he wanted when he wanted it." With the beginning of such a learning, Tom was on the way to finding out that it was not a catastrophe if his narcissism was not always satisfied, he could be rejected without "dying" or being totally the victim of fate. A next step in his learnings would be his ability to enjoy shared love without being anxious over having to forego all of his own need satisfaction or becoming the pawn of the loved object in his efforts to avoid rejection.

Berzon (1965) identifies various types of responses to the behaviors of other group members, ranging from those responses which maintain alienation, to those which are an intimate sharing. When a group is maintaining alienation, the responses to one another are intellectual in nature. A subject matter rather than the immediate responses of the people in the group is the focus. If there are responses to one another they are brief, perfunctory and evasive. Responses to a member's expressed worries may be "You'll outgrow that," or "My brother had that problem and he got over it." (This may be an effort to avoid closeness at any cost or may simply be a brief reprieve following or prior to a group "peak experience." No group maintains closeness and intimacy throughout, but experiences the ongoing dialecticism of conflict and fusion.)

As the attempt to create distance reduces and trust and courage increase,

> Group members actively extend themselves in an accepting, empathic, understanding and committed way to others in the group. They do this by such means as (1) taking the part of the others, (2) sharing their own conflicts, or (3) expressing a deep, genuine concern for the other. There is implicit in their communication with each other the message, "I am with you." The interaction is intense, intimate and compelling. (Berzon, 1965)

THE EXISTENTIAL GROUP LEADER

The existential group leader's functions are: (1) the disclosure of his reactions to the behavior of other group members; (2) assisting member's in the group to react openly and honestly to one another; and (3) building conditions which will facilitate self-disclosure. The group leader may occasionally disclose some of his own feelings and become "vulnerable" to the group at which time they are the facilitators of his therapeutic growth but his primary functions are the three mentioned above. These three major functions of the existential group leader are performed by most of the group members at one time or another. A key characteristic of the existential group is the dissemination of leadership throughout the group. The leader is the person who, at the moment, is performing the function which facilitates courage and openness in the group. The term "facilitator" is often used to designate the existential group leader and is probably preferable to the connotations of the word "leader." The existential group facilitator "gets things going," he sets the structure and general direction of the group, but does not by any means always provide the most frequent or most impactful behavior in the life of the group. It is part of the sensitivity of the group leader to know and facilitate the use of therapeutic strengths which reside in group members.

The existential group leader is open to his own experience and that of the group members and should have the courage to face and respond honestly to experiences in himself and others which arouse existential and neurotic anxiety. He shows a willingness to risk experiencing the full range of his own feelings and thoughts and those of the group. He is a person who engages in few defensive maneuvers which distort or deny reality. It is apparent, then, that the existential counselor cannot rely primarily on a set of techniques for his success but it is his personal qualities which facilitate or impede desired change in group members. The question has often been raised concerning the amount of formal training needed by the existential group leader. Mowrer (1964) holds the position that professional training is inconsequential.

> But if self-disclosure on the part of a "patient" is the essence of therapy, and if openness and transparency on the part of the helping other is the best way of encouraging such a step, then anyone who has been, in this sense, "born again" can be a "therapist," without being, by any means, "a professional expert." (Mowrer, 1964)

In fact, Mowrer speaks as if graduate training were a detriment rather than an an asset in existential group counseling. May, et al., acknowledges the importance of formal training, even though he sees certain personal, attitudinal characteristics as being the primary change agents in counseling.

> The student and practicing psychologist must steer his course between the Scylla of letting knowledge of techniques be a substitute for direct understanding in communication with the patient and the Charybdis of assuming that he acts in a rarefield atmosphere of clinical purity without any constructs at all. (May, et al., 1958)

Berzon (1964) found that self-directed counseling groups consisting of inexperienced clients show negative change while equivalent professionally led groups showed positive change on the Constructive Personality Change Index of the Minnesota Multiphasic Personality Inventory (MMPI). The study also revealed that the incidence of facilitative therapeutic behavior was higher in the professionally led group.

BIBLIOGRAPHY

Abraham, W. Investigation of mental retardation in relation to bilingual and subcultural factors. Tempe, Ariz.: College of Education, Arizona State University. Pp. 1-9.

Ackerman, N. The psychodynamics of family life. New York: Basic Books, 1958.

Ackerman, N.W. Group psychotherapy with a mixed group of adolescents. International Journal of Group Psychotherapy, 1955, 5, 249-260.

Ackerman, N.W. Symptomatic defenses and growth in group procedures. International Journal of Group Psychotherapy, 1961, 131-142.

Adams, H.E., & Frye, R.L. Psychotherapeutic techniques as conditioned reinforces in a structured interview. Psychological Reports, 1964, 14(1), 163-166.

Adams, J.F. Counseling and guidance: A summary review. New York: MacMillan, 1965.

Aiken, E.G. Changes in interpersonal descriptions accompanying the operant conditioning of frequency in groups. Journal of Verbal Learning and Verbal Behavior, 1963, 4, 243-247.

Allport, G.W. The psychology of participation. Psychological Review, May, 1945, 52, 117-132.

Allport, G. W. Becoming: Basic considerations for a psychology of personality. New Haven: Yale University Press, 1955.

Allport, G. W. Personality and social encounter. Boston: Beacon Press, 1960.

Allport, G. W. Psychological models in guidance. Harvard Educational Review, 1962, 32(4), 373-381.

American Psychiatric Association. Diagnostic and statistical manual: mental disorders. Washington, D.C., 1952.

Amos, W. E. Job adjustment problems of delinquent minority group youth. Vocational Guidance Quarterly, 1964.

Amundson, C.L. Increasing interpersonal relationships in the high school with the aid of sociometric procedures. Journal of Group Psychotherapy, 1954, 6, 183-188.

Anderson, H.A. Another study of dropouts. School Review, 1950, 58, 318-19.

Andrews, E. E. Identity maintenance operations and group psychotherapy process. International Journal of Group Psychotherapy, 1964, 14, 491-499.

Ansbacher, H. L. The history of the leaderless group discussion technique. Psychological Bulletin, 1951, 48, 383-391.

Antene, W. Changes in topic and affect during group counseling: Its relationship to outcomes of group counseling. University of Illinois , 1963.

Argyris, C. Interpersonal competence and organizational effectiveness. Homewood, Ill.: Dorsey Press, 1962.

Argyris, C. Integrating the individual and the organization. New York: John Wiley, 1964. (a)

Argyris, C. T-groups for organizational effectiveness. Harvard Business Review, 1964, 42(2), 60-74. (b)

Arsenian, J., Semrad, E.V., & Shapiro, D. An analysis of integral functions in small groups. International Journal of Group Psychotherapy, 1962, XII(4) 421-434.

Assum, A.L., & Levy, S. J. Journal of Abnormal and Social Psychology, 1948, 43, 78-79.

Axline, V.M. Journal of Consulting Psychology, 1947, 11, 61-69.

Azrin, N.H., & Lindsley, O.R. The reinforcement of cooperation between children. Journal of Abnormal and Social Psychology, 1956, 52(1), 100-102.

Bach, G. R. Intensive group psychotherapy. New York: Ronald Press, 1954.

Bach, G. R. Observations on transference and object relations in the light of group dynamics. International Journal of Group Psychotherapy, 1957,7,64-76.

Bach, G.R. The marathon group: Intensive practice of initimate interaction. Psychological Reports, 1966, 18, 995-1002.

Bach, G.R. Marathon group dynamics: 1. Some functions of the professional group facilitator. Psychological Reports, 1967, 20, 995-999.

Bachrach, A.J., Candland, D.K., & Gibson, J.T. Experiments in verbal behavior: I. Group reinforcement of individual response. Technological Report, 1960, 8, 478.

Bachrach, A.J., Candland, D.K., & Gibson, J.T. Experiments in verbal behavior: Group reinforcement of individual response. In I. Berg & B. Bass (Eds.). Conformity and deviation. New York: Harper, 1961

Bales, R. F. Interaction process analysis. Cambridge: Addison-Wesley Press, 1950.

Bales, R. F. Interaction process analysis: A method for the study of small groups. Cambridge: Addison-Wesley, 1956.

Bandura, A. Psychotherapy as a learning process. Psychological Bulletin, 1961, 58, 143-159.

Bandura, A., Lipsher, D. H., & Miller, P. E. Psychotherapists' approach-avoidance reactions to patients' expressions of hostility. Journal of Consulting Psychology, 1960, 24, 1-8.

Bandura, A., & McDonald, F. J. Influence of social reinforcement and the behavior of models in shaping children's moral judgement. Journal of Abnormal and Social Psychology, 1963, 67, 274-281.

Bandura, A., & Mischal, W. Modification of self-imposed delay of reward through exposure to live and symbolic models. Journal of Personnel and Social Psychology, 1965, 2, 698-705.

Bandura, A., Ross, D., & Ross, S. A. Imitation of film mediated aggressive models. Journal of Abnormal and Social Psychology, 1963, 66, 3-11.

Bandura, A., & Walters, R. H. Social learning and personality development. New York: Holt, Rinehart & Winston, 1963.

Bany, M., & Johnson, L. Classroom group behavior. New York: Macmillan, 1964.

Barclay, A. G., & Cueumans, D. R. The study of man: Testing masculinity in boys without fathers. Trans-Action, Dec., 1967.

Bard, J. A., & Creelman, M. B. Parent education in a group therapy setting. International Journal of Group Psychotherapy, 1954, 5, 429-436.

Bardill, D. R. The group process in group therapy. Mental Hygiene, 117-122.

Barker, L., & Wiseman, G. A model of interpersonal communication. Journal of Communication, 1966, 16(3), 172-179.

Barrett, W. Irrational man: A study in existential philosophy. New York: Doubleday & Co., 1962.

Barrett-Lennard, G. T. Dimensions of therapist response as casual factors in therapeutic change. Psychological Monograph, 76(43), 1962, 1-36.

Bartlett, M. R., & Staff. Mimeographed report, Office of Vocational Rehabilitation & Education.

Bass, B. M., & Dunteman, G. Behavior in groups as a function of self-interactions and task orientation. Journal of Abnormal and Social Psychology, 1963, 66, 414-428.

Bates, M. Themes in group counseling with adolescents. Personnel and Guidance Journal, 1965, 44(6), 568-576.

Baymur, B. B., & Patterson, C. H. A comparison of three methods of assisting underachieving high school students. Journal of Counseling Psychology, 1960, 7, 83-90.

Beck, D. F. The dynamics of group psychotherapy as seen by a sociologist, Part I: The basic process. Sociometry, June, 1958, 21, 98-128. (a)

Beck, D. F. The dynamics of group psychotherapy as seen by a sociologist, Part II: Some puzzling questions in leadership, contextual relations and outcomes. Sociometry, 1958, 21, 180-197. (b)

Beilin, H. The application of general developmental principles to the vocational area. Journal of Counseling Psychology, 1955, 2, 53-57.

Bell, J. Recent advances in family group therapy. International Journal of Child Psychology and Psychiatry, 1962, 1-15.

Belovsky, D., McMasters, W., Shorr, E., & Singer, S. L. Individual and group counseling. Personnel and Guidance Journal, 1953, 31, 363-365.

Benne, K. D., & Sheats, P. Functional roles of group members. Journal of Social Issues, 1948, 4, 41-49.

Bennett, M. Guidance and counseling in groups. New York: McGraw-Hill, 1963.

Bennis & Samuels. Constructive behavior change in therapeutic groups. LaJolla: Western Behavioral Science Institute.

Bennis, W. G., Schein, E. H., Berlew, D. E., & Steele, F. I. (Eds.) Interpersonal dynamics: Essays and readings on human interaction. Homewood, Ill.: Dorsey Press, 1964.

Berelson, B., & Steiner, G. Human behavior, an inventory of scientific findings. New York: Harcourt, Brace & World, 1964.

Berger, M. M. Non-verbal communications in group psychotherapy. International Journal of Group Psychotherapy, 1958, VIII(2), 162-178.

Berger, M. M. An overview of group psychotherapy. International Journal of Group Psychotherapy, 1962, 12(3), 287-294.

Berger, M. M., & Rosenbaum, M. Group psychotherapy and group function. New York: Basic Books, 1963.

Berger, S. Conditions through vicarious instigation. Psychological Review, 1962, 69, 450-466.

Berlo, D. The process of communication. New York: Holt, Rinehart & Winston, 1960.

Berman, S. Psychotherapeutic Techniques with adolescents. American Journal of Orthopsychiatry, April, 1954, 24, 238-244.

Berne, E. Psychoanalytic versus dynamic. G. T. International Journal of Group Psychotherapy, 1960, 10, 98-103.

Berne, E. Transactional analysis in psychotherapy. New York: Grove Press, 1961

Berne, E. The structure and dynamics of organizations and groups. New York: Grove Press, 1963.

Berne, E. Principles of group treatment. New York: Oxford University Press, 1966.

Berzon, B. The dimensions of interpersonal repsonsibility in therapeutic groups. La Jolla: Western Behavioral Science Institute.

Berzon, B. The self-directed therapeutic group: An evaluative study. La Jolla: Western Behavioral Science Institute.

Berzon, B. The self-directed therapeutic group: An evaluative study. Paper read at the American Psychological Association Convention, Chicago, 1964.

Berzon, B. A scale for the evaluation of therapeutic climate in small groups. A self-training manual. La Jolla: Western Behavioral Science Institute, 1965.

Berzon, B., & Solomon, L. N. A training-in-interaction program for self-directed groups. La Jolla: Western Behavioral Science Institute.

Berzon, B., & Solomon, L. N. The self-directed therapeutic group: An exploratory study. International Journal of Group Psychotherapy, 1964, 14(3), 366, 369.

Berzon, B., & Solomon, L. N. The self-directed therapeutic group: Three studies. Journal of Counseling Psychology, 1966, 13(4).

Beukenkamp, C. The non-communication between husbands and wives as revealed in group psychotherapy. International Journal of Group Psychotherapy, 1959, 9, 308-313.

Biddle, B., & Thomas, E. (Eds.). Role theory: Concepts and research. New York: John Wiley, 1966.

Bills, R. E. Journal of Consulting Psychology, 1950, 14, 140-149.

Bion, W. R. Experiences in groups. New York: Basic Books, 1961.

Bischof, L. Interpreting personality theories. New York: Harper & Row, 1964.

Blau, P. The dynamics of bureaucracy: A study of interpersonal relations in two government agencies. Chicago: University of Chicago Press, 1955.

Blau, P., & Scott, W. R. Formal organizations: A comparative approach. San Francisco: Chandler Publishing Co., 1962.

Blocher, D. H. Developmental counseling. New York: Ronald Press, 1966.

Bloom, B. A., Davis, A., & Hess, R. Compensating education for cultural deprivation. New York: Holt, Rinehart & Winston, 1965.

Bock, J. C. Self-orientation and orientation to others during non-directive group psychotherapy. Medical Service Journal of Canada, 1961, 17(2), 111-117.

Boenheim, C. Group psychotherapy with adolescents. International Journal of Group Psychotherapy, Oct., 1957, 7(4), 398-405.

Bonner, H. Group dynamics. New York: Ronald Press, 1959.

Bonney, W. C. Pressures toward conformity in group counseling. Personnel and Guidance Journal, 1965, 43, 970-973.

Bonney, W. C., & Foley, E. J. The transition stage in group counseling in terms of congruity theory. Journal of Counseling Psychology, 1963, 10, 136-138.

Bonney, W. C., & Gazda, G. Group counseling experiences: Reactions by counselor candidates. Counselor Education and Supervision, Summer, 1966, V(4), 205-211.

Boring, R. O., & Deabler, H. L. Simplified psychodramatic approach in group therapy. Journal of Clinical Psychology, 1951, 7, 371-375.

Borow, H. (Ed.) Man in a world of work. Boston: Houghton Mifflin, 1964.

Bosco, J. An investigation of the effectiveness of group psychotherapy in improving the adjustment of adolescent girls in an institutional setting. Ohio State University, 1951.

Bostrom, R., Vlandis, J. W., & Rosenbaum, M. E. Grades as reinforcing contingincies and attitude change. Journal of Educational Psychology, 1961, 52, 112-115.

Bowen, M. Family psychotherapy. American Journal of Orthopsychiatry, 1961, 31, 40-60.

Boy, A. V., Isaksen, H. L., & Pine, G. Multiple counseling. The School Counselor, Oct., 1963, 11, 8-11.

Bradford, L. P., Gibb, J. R., & Benne, K. D. (Eds.) T-group theory and laboratory method. New York: John Wiley, 1964.

Bradford, L. P., & Mial, D. When is a group? Educational Leadership, Dec., 1963, 147-151.

Brammer, L. M., & Shostrom, E. L. Group Dynamics, Multiple counseling and group psychotherapy. In Therapeutic psychology. Englewood Cliffs, N. J.: Prentice-Hall, 1960.

Briggs, W. A., & Hummell, D. L. Counseling minority group youth. Columbus: F. J. Heer Printing, 1962.

Broedel, J., Ohlsen, M., Proff, F., & Southard, C. The effects of group counseling on gifted underachieving adolescents. Journal of Counseling Psychology, 1960, 7, 163-170.

Bross, R. B. The family unit in group psychotherapy. International Journal of Group Psychotherapy, 1954, 4, 393-408.

Bross, R. B. Termination of analytically oriented psychotherapy in groups. International Journal of Group Psychotherapy, 1959, 9, 326-337.

Bry, T. Varieties of resistance in group psychotherapy. International Journal of Group Psychotherapy, 1951, 1, 106-114.

Buchmueller, A. D., Porter, F., & Gildea, M. Group therapy project with parents of behavior problem children in public schools. Nervous Child, 1954, 10, 415-24.

Bugental, J. F. T. Five Paradigms for group psychotherapy. Psychological Reports, 1962, 10, 607-610.

Bugental, J. F. T. Challenges of humanistic psychology. New York: McGraw-Hill, 1967.

Burton, G. Group counseling with alcoholic husbands and their nonalcoholic wives. Marriage and Family Living, 1962, 24, 56-61.

Byrne, R. H. The school counselor. Boston: Houghton Mifflin, 1963.

Cahoon, D. D. A comparison of the effectiveness of verbal reinforcement applied in group and individual interviews. Journal of Counseling Psychology, 1964, 12(2), 121-126.

Caldwell, E. Group techniques for the classroom. Chicago: Science Research Associates, 1960, #5-40.

Campbell, D. R., & Stanley, J. C. Experimental and quasi-experimental designs for research on teaching. In N. L. Gage (Ed.), Handbook of research on teaching. Chicago: Rand McNally, 1963.

Caplan, S. W. The effect of group counseling in junior high school boys' concept of themselves in school. Journal of Counseling Psychology, 1957, 4, 124-128.

Caplow, T. The sociology of work. Minneapolis: University of Minnesota Press, 1954.

Carkhuff, R. R. Counseling research, theory and practice - 1965. Journal of Counseling Psychology, 1966, 13(4), 467-480.

Carkhuff, R. R., & Truax, C. B. Lay mental health counseling: The effects of lay group counseling. Journal of Consulting Psychology, 1965, 29, 426-431.

Cartwright, D. P. Achieving change in people: Some applications of group dynamics theory. Human Relations, 1951, 4, 381-392.

Cartwright, D., & Zander, A. Group dynamics: Research and theory. Evanston: Row, Peterson & Co., 1960.

Catron, D. W. Education-vocational group counseling: The effects on perception of self and others. Journal of Counseling Psychology, 1966, 13, 202-207.

Cattell, R. B. New concepts for measuring leadership in terms of group syntality. Human Relations, 1951, 4, 161-184.

Cervantes, A. J. To prevent a chain of super-Watts. Harvard Business Reivew, Sept.-Oct., 1967, 55-65.

Cervantes, L. T. The drop-out: Causes and cures. Ann Arbor: University of Michigan Press, 1965.

Chance, E. Families in treatment. New York: Basic Books, 1959.

Chesnut, W. J. The effect of structured and unstructured group counseling in male college subjects' underachievement. Journal of Consulting Psychology, 1965, 12, 388.

Christman, J. J. Group methods in training and practice - Non-professional mental health personnel in a deprived community. American Journal of Orthopsychiatry, 1965, 35, 380.

Christman, J. J., & Davis, E. B. Group therapy programs with the socially deprived in community psychiatry. International Journal of Group Psychotherapy, Oct., 1965, 464-476.

Cientat, V. J. Surreptitious modification of verbal behavior during class discussion. Psychological Reports, 1959, 5, 648.

Clark, J. B., & Culbert, S. A. Mutually therapeutic perceptions and self-awareness in a T-group. Journal of Applied Behavioral Science, 1965, 1(2), 180.

Cleland, R. S., & Carnes, G. D. Emotional vs. ideational emphasis during group counseling with student nurses. Journal of Counseling Psychology, 1965, 12(3), 382-385.

Clements, B. E. Transitional adolescents, anxiety, and group counseling. Personnel and Guidance Journal, 1966, 45, 67-71.

Clevenger, T. Some characteristics of the study of communication in 1960. Journal of Communication, Dec., 1960, X(4), 163-173.

Cloward, R. A., & Ohlin, L. E. Delinquency and opportunity. New York: Free Press of Glencoe, 1960.

Coffey, H. S. Socio and psyche group processes: Integrative concepts. Journal of Social Issues, 1951, 8, 65-74.

Coffey, H. Group psychotherapy. In Pennington & Berg (Eds.), An Introduction to clinical psychology. New York: Ronald Press, 1954, 586-607.

Cohen, A. R. Attitude change and social influence. New York: Basic Books, 1964.

Cohn, B. (Ed.) Guidelines for future research on group counseling in the public school setting. Bedford Hills, N. Y.: Board of Co-operative Educational Services and the U. S. Office of Education research project No. F-029,1964.

Cohn, B., Combs, C. F., Gibian, E. J., & Sniffen, A. M. Group counseling: An orientation. American Personnel and Guidance Journal, Dec., 1963, 355-356.

Cohn, B. Dunsmoor, C. C., Combs, C. F., Bigian, E. J., & Sniffen, A. M. The effects of group counseling on school adjustment of underachieving junior high school boys who demonstrate acting-out behavior. 1964.

Cohn, B., Ohlsen, M. M., & Prof. F. C. Roles played by adolescents in an unproductive counseling group. Personnel and Guidance Journal, May, 1960, 38, 724-731.

Cohn, B., & Sniffen, A. M. School report on group counseling. Personnel and Guidance Journal, 1962, 41, 133-138.

Combs C. F., Cohn, B., Gibbian, E., & Sniffen, A. M. Group counseling: Applying the technique. School Counselor, 1963, 11, 12-18.

Company experience with negro employment: Studies in personnel policy. New York: National Industrial Conference Board, 1966, 1(201).

Coons, W. H. Interaction and insight in group psychotherapy. Journal of Psychology, 1957, 2, 1-8.

Corrothers, M. L. Sexual themes in an adolescent girls' group. International Journal of Group Psychotherapy, Jan., 1963, XIII (1), 43-51.

Corsini, R. Group therapy with a hostile group. Group Psychotherapy, 1954, 6, 168-173.

Corsini, R. J. Historic Background of group psychotherapy: A critique. Group Psychotherapy, 1955, 8, 219-255. (a).

Corsini, R. J. Towards a definition of group psychotherapy. *Mental Hygiene*, 1955, 39, 647-656. (b)

Corsini, R. *Methods of group psychotherapy*. New York: McGraw-Hill, 1957.

Corsini, R. J. *Role playing in psychotherapy*. Chicago: Aldine Publications, 1966.

Corsini, R. J., & Putzey, L. J. Bibliography of group psychotherapy: 1906-1955. *Psychodrama and Group Psychotherapy Monographs*. Beacon, N. Y.: Beacon House, 1957, No. 29.

Corsini, R. J., & Rosenberg, B. Mechanisms of group psychotherapy: Process and dynamics. *Journal of Abnormal and Social Psychology*, 1955, 51(3), 406-411.

Cownen, E. L., & Combs, A. W. *Journal of Abnormal and Social Psychology*, 1950, 45, 232-258.

Crockett, W. H. Emergent leadership in small decision-making groups. *Journal of Abnormal and Social Psychology*, 1955, 51, 378-383.

Culturally deprived students. *Review of Educational Research*, April, 1966, 36(2), 316-322.

The culturally disadvantaged: Further observations. Exceptional Children, Jan., 1963, 226-236.

Cunnningham, R. *Understanding group behavior of boys and girls.* New York: Bureau of Publications, Teachers College, Columbia University, 1951.

Daane, C. J., & Hagebak, B. R. The dropout and social concern. Tempe, Ariz.: Bureau of Research and Service, Arizona State University, 1964.

Daane, C. J., & McGreevy, C. P. The counseling process and function. *Review of Educational Research*, April, 1966, 36(2), 264-273.

Daane, C. J., & Rhum, G. J. Explorations in the measurement of empathy as analytical predictive ability. *Iowa Academy of Science*, 1962, 69, 502-512.

Dalton, R. H. *Personality and social interaction.* Boston: D. C., Health, 1961.

D'Angelo, R. Y. An evaluation of GP with institutionalized delinquent girls. Fordham University, 1961.

David, K. Human relations at work. New York: McGraw-Hill, 1962.

Davis, D. A. Effect of group counseling and individual counseling on citizenship behavior. Personnel and Guidance Journal, 1959, 38, 142.

Delatil, P. Sociometry: The science of human groups. International Journal of Sociometry and Sociotry, 1963, 3, 39-41.

Della-Dora, D. The culturally disadvantaged: Educational implications of certain socio-cultural phenomena. Exceptional Children, 1962, 28, 467-472.

Della-Dora, D. The culturally disadvantaged: Further observations. Exceptional Children, Jan., 1963, 29, 226-236.

Dennis, W. Group values through children's drawings. New York: John Wiley & Sons, 1966.

Derr, J., & Silver, A. W. Predicting participation and behavior in group therapy from test protocols. Journal of Clinical Psychology, 1962, 18, 322-325.

Deutsch, M. Field theory in social psychology. In G. Lindzey (Ed.), Handbook of social psychology. Vol. 1. Cambridge: Addison-Wesley, 1954. Pp. 181-222.

Deutsch, M. The disadvantaged child. New York: Basic Books, 1967.

Dickenson, W. A., & Turax, C. B. Group counseling with college underachievers. Personnel and Guidance Journal, 1966, 45, 243-247.

Diebold, J. Implications of cybernetics. In Automation: The threat and the promise. Washington, D. C.: National Vocational Guidance Association, 1964.

Differences that make a difference. Washington, D. C.: Joint Commission on Correctional Manpower and Training, 1967.

Dinoff, M., Horner, R. F., Kurpiewski, B. S., Rickard, H. C., & Timmons, E. O. Conditioning verbal behavior of a psychiatric population in a group therapy-like situation. Journal of Clinical Psychology, 1960, 16, 371.

Dinoff, M., Horner, R. F., Kurpiewski, B. S., & Timmons, E. O. Conditioning verbal behavior of schizophrenics in a group therapy-like situation. Journal of Clinical Psychology, 1960, 16, 362-370.

Dixon, W. J., & Massey, F. J. *Introduction to statistical analysis*. New York: McGraw-Hill, 1957.

Dollard, J., & Miller, N. E. *Personality and psychotherapy: An analysis in terms of learning, thinking, and culture*. McGraw-Hill, 1956.

Dostoevsky, F. M. Notes from the underground. In W. Kaufmann (Ed.), *Existentialism: From Dostoevsky to Sartre*. New York: World Publishing Co., 1956.

Drease, M. Group guidance and group therapy. *Review of Educational Research*, 1957, 27, 229-235.

Dreikurs, R. The unique social climate experienced in group psychotherapy. Group Psychotherapy, 1951, 3, 292-299.

Dreikurs, R. Adlerian analysis of interaction. *Group Psychotherapy*, 1955, 8, 298-307. (a)

Dreikurs, R. Group psychotherapy from the third revolution in psychiatry. International Journal of Social Psychiatry, 1955, 1(3), 23-32. (b)

Dreikurs, R. Group psychotherapy from the point of view of Adlerian psychology. *International Journal of Group Psychotherapy*, 1957, 7, 363-375.

Dreikurs, R. Early experiments with group psychotherapy. *American Journal of Psychotherapy*, 1959, 13, 882-891.

Dreikurs, R. *Group psychotherapy and group approaches*. Chicago: Alfred Adler Institute, 1960.

Dreikurs, R., & Corsini, R. J. Twenty years of group psychotherapy. *American Journal of Psychiatry*, 1954, 110, 567-575.

Driver, H. (Ed.) *Counseling and learning through small group discussion*. Madison: Monona Publications, 1958.

Dubois, R. D., & Mew-Soong Li. *The art of group conversation*. New York: Association Press, 1963.

Dudycha, G. J. *Applied psychology*. New York: Ronald Press, 1963.

Duffy & Kraft. Group therapy of the early adolescent: An evolution of one year of group therapy with a mixed group of early adolesence. *American Journal of Orthopsychiatry*, 1965, 35, 372.

Durkin, H. E. *Group therapy for mothers of disturbed children.* Springfield, Ill.: Charles C. Thomas, 1954.

Durkin, H. E. Acting out in group psychotherapy. *American Journal of Orthopsychiatry*, 1955, 25, 644-652.

Durkin, H. E. *The group in depth.* New York: International University Press, 1964.

D'Zurilla, T. J. Persuasion and praise as techniques for modifying verbal behavior in a 'real-life' group setting. *Journal of Abnormal Psychology*, 1966, 71(5), 369-376.

Eadis, L. E., Erasmer, J. D., & Wintek, C. *A practicum of group psychotherapy.* New York: Harper & Row, 1963.

Edwards, A. L. *Experimental design in psychological research.* New York: McGraw-Hill, 1957.

Ehrle, R. A. (Ed.) *Counseling in the public employment service.* Washington, D. C.: Leviathan, 1966.

Eisenmon, R. Operant conditioning of the sequence of speakers in conversation and group psychotherapy. *Journal of Psychology*, 1965, 61(2), 305-309.

Ellis, A., & Harper, R. A. *A guide to rational living.* Hollywood: Wilshire Book Co., 1961.

Ellis, G. Report on a follow-up study of class of 1965. Phoenix: Phoenix Union High School District, 1963.

English, H. B., & English, A. C. *A comprehensive dictionary of psychological* and psychoanalytical terms. New York: David McKay Co., 1958.

Ensign, J., & Roush, H. P. Guide lines for group counseling. Jewish Family and Children Service of Phoenix (Ariz.), Aug. 5, 1964.

Epstein, N. Recent observations on group psychotherapy with adolescent delinquent boys in residential treatment: Activity GT. *International Journal of Group Psychotherapy*, 1960, 10, 180–194.

Eriksen, C. W. Unconscious precesses. In M. R. Jones (Ed.), *Nebraska Symposium on Motivation.* Lincoln: University Press, 1958, 169-227.

Eriksen, C. W., & Kuether, J. L. Avoidance conditioning of verbal behavior without awareness: A paradigm of repression. *Journal of Abnormal and Social Psychology*, 1956, 53, 203-209.

Erikson, E. H. *Childhood and Society*. New York: Norton, 1950.

Etzioni, A. *Modern organization*. Englewood Cliffs: Prentice-Hall, 1964.

Fantini, M. D., & Weinstein, G. Strategies for initiating educational change in large bureaucratic school systems. *American Journal of Orthopsychiatry*, 1965.

Faris, R. E. L. Interaction levels and intergroup relations. In M. Sherif (Ed.) *Intergroup relations and leadership*. New York: John Wiley, 1962.

Farson, R. E. What are people for? In W. R. Maes (Ed.), *The elementary school counselor: A venture in humanness*. Arizona State University Bureau of Educational Research and Services, 1966.

Farson, R. Self-directed groups and community mental health. La Jolla Western Behavioral Science Institute.

Feder, B. Limited goals in short-term group psychotherapy with institutionalized delinquents. *International Journal of Group Psychotherapy*, Oct., 1962, XII(4), 503-507.

Fein, L. G. The use of psychodrama to strengthen self concepts of student nurses. *Group Psychotherapy*, 1963, 16, 161-163.

Festinger, L. A theory of social comparison processes. *Human Relations*, 1954, 117-137.

Festinger, L. *A theory of cognitive dissonance*. Evanston: Row, Peterson, & Co., 1957.

Festinger, L., & Thibaut, J. Interpersonal communication in small groups. *Journal of Abnormal and Social Psychology*, 1951, 46, 92-99.

Fiedler, F. E. An experimental approach to preventative psychotherapy. *Journal of Abnormal and Social Psychology*, July, 1949, 44, 386-393.

Fiedler, F. E. A comparison of therapeutic relationships in psychoanalytic, non-directive and Adlerian therpay. *Journal of Consulting Psychology*, 1950, 14, 436-445.

Fiedler, F. E. Leader attitudes and group effectiveness. Urbana: University of Illinois Press, 1958.

Final report on the Institute for Teachers of Disadvantaged Youth. Princeton: Princeton University, 1965.

Fine, H. J., & Zimet, C. N. A quantitative method of scaling communication and interaction process. Journal of Clinical Psychology, July, 1956, 12, 268-271.

Fink, A. K. The democratic essence of psychodrama. Group Psychotherapy, 1963, 16, 156-160.

Finney, B. C. A scale to measure inter-personal relationships in group psychotherapy. Group Psychotherapy, 1954, 7, 52-66.

Foley, W. J., & Bonney, W. C. A developmental model for counseling groups. Personnel and Guidance Journal, 1966, XLIV(6), 576-590.

Ford, D. H. Group and individual counseling in modifying behavior. Personnel and Guidance Journal, 1962, 40, 770-773.

Ford, D. H., & Urban, H. B. Systems of psychotherapy. New York: John Wiley, 1963.

Foreman, M. E. T-groups: Their implications for counselor supervision and preparation. Counselor Education and Supervision, Fall, 1967, 48-52.

Forer, B. R. Personality factors in occupational choice. Educational and Psychological Measurement, 1953, 13, 361-366.

Foulkes, S. H. Group processes and the individual in the therapeutic group. British Journal of Medical Psychology, 1961, 34, 23-31.

Foulkes, S. H., & Anthon, E. J. Group psychotherapy. Baltimore: Penquin Books, 1965.

Frank, J. Group psychotherapy in relation to research. Group Psychotherapy, 1950, 3, 197-203.

Frank, J. D. Group methods in psychotherapy. Journal of Social Issues, 1952, 8(2), 35-44.

Frank, J. D. Some determinants, manifestations, and efforts of cohesiveness in therapy groups. International Journal of Group Psychotherapy, 1957, 7, 53-63.

Frank, J. Group psychotherapy. In A. Deutsch (Ed.), The encyclopedia of mental health. Vol. II New York: Franklin Watts, 1963.

Franklin, G. H. The effect of GT on the attitude toward self and others of institutionalized delinquent boys. Ph.D. Thesis. New York Univeristy, 1958.

Freedman, M. B., & Sweet, B. S. Some specific features of group psychotherapy and their implications for selection of patients. International Journal of Group Psychotherapy, Oct., 1954, 4, 355-368.

Freeman, R. St. J., & Freeman, H. A. Counseling: A bibliography (with annotations). New York: Scarecrow Press, 1964.

Freeman, V. J., Klein, A. F., Richard, L. M., Lukoff, I. F., & Miesey, V. E. Family group counseling as differential from other family therapies. International Journal of Group Psychotherapy, April, 1963, 13, 167-175.

Freud, S. Group psychology and the analysis of the ego. London: Hogarth, 1948.

Friedenberg, E. Z. Ideology of school withdrawal: Summary of address, December, 1962. Commentary, 1963, 35, 492-500.

Froehlich, C. P. Must counseling be individual? Educational and Educational Measurement, 1958, 18, 681-689.

Fromm, E. Escape from freedom. New York: Rinehart, 1947.

Frost, J., & Hawkes, G. (Eds.) The disadvantaged child. Boston: Houghton-Mifflin, 1966.

Fullmer, D. W., & Bernard, H. W. Group work in educational setting. In Counseling: Content and process. Chicago: Science Research Associates, 1964.

Gadpaillo, W. J. Observations on the sequence of resistances in groups of adolescent delinquents. International Journal of Group Psychotherapy, July, 1959, 9, 275-286.

Gard, J. G. Fundamental interpersonal relations orientations in clinical groups. Ph. D. thesis. University of Pittsburgh, 1961.

Gardner, E. F., & Thompson, G. C. Social relations and morale in small groups. New York: Appleton-Century crofts, 1956.

Garlow, L. The nature of non-directive group psychotherapy. New York: Teachers College Bureau of Publications, 1952.

Garlow, L., Hock, E., & Telschow, E. The nature of non-directive group psychotherapy. New York: Teachers College Bureau of Publications, 1952.

Gavales, D. Effects of combined counseling and vocational training on personal adjustment. Journal of Applied Psychology, 1966, 50, (1), 18-21.

Gawrys, J., & Brown, O. B. Group counseling: More than a catalyst. The School Counselor, May, 1965, 12(4), 206-213.

Gazda, G. Group counseling - A growing solution. Catholic Counselor, 1963, 8, 17-23.

Gazda, G. New trends in counseling. The School Counselor, Oct., 1965, 13(1), 14-16.

Gazda, G. M. (Ed.) Innovations in group therapy. Springfield, Ill.: Charles C. Thomas, 1967.

Gazda, G. M., & Bonney, W. C. Effects of group counseling on role behavior of counselors in training. Counselor Education and Supervision, Summer, 1965, IV(4), 191-197.

Gazda, G. M., Duncan, J. A., & Meadows, M. E. Group counseling and group procedures - Report of a survey. Counselor Education and Supervision, 6(4), 305-310.

Gazda, G., & Ohlsen, M. The effects of short-term group counseling on prospective counselors. Personnel and Guidance Journal, 1961, 39, 634-638.

Gersten, C. An experimental evaluation of group psychotherapy with juvenile delinquents. International Journal of Group Psychotherapy, 1951, 1, 311-318.

Gibb, C. A. Leadership. In G. Lindzey (Ed.), Handbook of social psychology. Vol. II. Cambridge: Addison-Wesley, 1954. Pp. 877-921.

Gibb, J. R. Defensive communication. ETC., June, 1965, 22(2).

Gibb, J. R., Platts, G. N., & Miller, L. F. Dynamics of participation groups. St. Louis: John S. Swift Co., 1951.

Gibran, K. The voice of the master. New York: Citadel Press, 1958.

Gilbreath, S. A. Group counseling with male underachieving college volunteers. *Personnel and Guidance Journal*, 1967, 45, 469-476.

Ginott, H. G. Play group therapy: A theoretical framework. *International Journal of Group Psychotherapy*, 1958, 8, 410-418.

Ginott, H. G. *Group psychotherapy with children*. New York: McGraw-Hill, 1961.

Ginzberg, E., et. al. *Occupational choice: An approach to a general theory*. New York: Columbia University Press, 1951.

Glanz, E. E. *Groups in guidance*. Boston: Allyn & Bacon, 1962.

Glaser, R., & Klaus, D. A reinforcement analysis of group performance. *Psychological Monographs*, 1966, 80, 13.

Glasser, W. *Reality therapy: A new approach to psychiatry*. New York: Harper & Row, 1963.

Goldburgh, S. J., & Glanz, E. C. Group counseling of students unable to speak in class. *Journal of College Student Personnel*, 1962, 4, 162-163.

Goldman, L. Group guidance: Content and process. *Personnel and Guidance Journal*, 1962, 40, 519-522.

Goldstein, A. P., Heller, K., & Sechrest, L. B. *Psychotherapy and the psychology of behavior change*. New York: John Wiley, 1966.

Golembiewski, R. *The small group: An analysis of research concepts and operations*. Chicago: University of Chicago Press, 1962.

Goodman, M., Marks, M., & Rockberger, H. Resistance in group psychotherapy enhanced by the countertransference reactions of the therapist: A peer group experience. *International Journal of Group Psychotherapy*, July, 1964, 14, 332-343.

Gordon, E. W. Counseling socially disadvantaged children. In F. Riessman, J. Cohen, & A. Pearl (Eds.), *Mental Health of the poor*. New York: Free Press of Glencoe, 1964.

Gordon, E. W. Characteristics of socially disadvantaged children. *Review of Educational Research*, 1965, 35(5), 377-385.

Gordon, J. Project CAUSE, the federal anti-poverty program and some implications of sub-professional training. *American Psychologist*, 1965, 20, 334-43.

Gordon, T. Group-centered leadership. Boston: Houghton-Mifflin, 1955.

Gottlieb, D. Poor youth do want to be middle class but it's not easy. Personnel and Guidance Journal, 1967, 46(2), 116-122.

Graham, J. A. The effect of the use of counselor positive responses to positive perceptions of mate in marriage counseling. Unpublished dissertation, Arizona State University, 1968.

Grater, H. A. Changes in self and other attitudes in a leadership training group. Personnel and Guidance Journal, 1959, 37, 493-496.

Greenberg, I.. Psychotherapy: Learning and relearning. Canada's Mental Health Supplement, Sept.-Dec., 1966, No. 53.

Greenspoon, J. The reinforcing effect of two spoken sounds on the frequency of two responses. American Journal of Psychology, 1955, 68, 409-416.

Gribbons, W. D. Evaluation of an eigth grade group guidance program. Personnel and Guidance Journal, 1960, 38, 740-745.

Gronlund, N. L. Sociometry in the classroom. New York: Harper, 1959.

Gross, E. Counseling special populations. Employment Service Review, Jan.-Feb., 1968.

Gross, E. Social effects of automation. In Automation: The threat and the promise. Washington, D. C.: National Vocational Guidance Association, 1964.

Gross, R. L. Therapy group composition: Personal-interpersonal variable. University of Utah. 1959.

Gross, W. The Gross report. April 21, 1967.

Grossback, M. M. Some effects of cooperation and competition upon small group behavior. Journal of Abnormal and Social Psychology, 1954, 49.

The group phenomenon. Psychology Today, Dec., 1967, 1(7), 16-41.

Guenther, W. C. Analysis of variance. Englewood Cliffs, N. J.: Prentice-Hall, 1964.

Gully, H. E. Discussion, conference and group processes. New York: Henry Holt, 1960.

Gursslin, O. R., Hunt, R. G., & Roach, J. L. Social class and the mental health movement. Social Problems, Winter, 1959-60, 7(3), 210-218.

Gutsch, K. U., & Bellamy, W. D. Effectiveness of an attitudinal group approach as a behavior determinant. The School Counselor, 1966, 14, 40-43.

Hadden, S. B. Treatment of male homosexuals in groups. International Journal of Group Psychotherapy, Jan., 1966, XVI(1), 13-22.

Haier, N. R. F. Principles of human relations. New York: John Wiley, 1952.

Haigh, G. Journal of Consulting Psychology, 1949, 13, 181-189.

Haigh, G. Existential encounter and creative expression. In W. A. Maes (Ed.), Counseling: A venture in human freedom. Tempe, Airz.: Arizona State University, Bureau of Educational Research and Services, 1968.

Haimann, F. Group leadership and democratic leadership. Cambridge: Riverside, Press, 1951.

Haimowitz, N. R. Ph. D. dissertation. University of Chicago, 1948.

Halkides, G. Ph. D. dissertation. University of Chicago, 1958.

Hall, C. S., & Lindsey, G. Theories of personality. New York: John Wiley & Sons, 1957.

Hamburger, M. Measurement issues in the counseling of the culturally disadvantaged. Paper for the 1964 Invitational Conferences on Testing Problems.

Hampton, P. J. Group psychotherapy with parents. American Journal of Orthopsychiatry, Dec., 1962, 32, 918-1126.

Hare, A. P. A review of small-group research for group therapists. International Journal of Group Psychotherapy, 1963, 13, 476-484.

Hare, A. P. Interpersonal relations in the small group. In R. E. L. Faris (Ed.), Handbook of modern sociology. Chicago: Rand McNally & Co., 1964.

Hare, A. P., Borgatta, E. F., & Bales, R. F. (Eds.) Small groups: Studies in social interaction. New York: Alfred A. Knopf, 1965.

Harms, E., & Schreiber (Eds.) Handbook of counseling techniques. New York: MacMillan, 1964.

Harnack, R. V., & Fest, T. B. *Group discussion theory and techniques.* New York: Appleton-Century-Crofts, 1964.

Harold, K. F. Evaluation and research in group dynamics. *Educational and Psychological Measurement*, 1950, 10, 492-504.

Harrington, S., & Markey. Poor academic performance in bright adolescent boys: A study in group psychotherapy. *American Journal of Orthopsychiatry*, 1965, 35, 345.

Harris, C. W. (Ed.) *Encyclopedia of educational research*. New York: MacMillan, 1960.

Harris, W. K. A beginning counselor's experience with group counseling. *The School Counselor*, 1965, 13, 47-50.

Hartley, E., & Rosenbaum, M. Criteria used by group psychotherapists for judging improvement in patients. *International Journal of Group Psychotherapy*, Jan., 1963, 13, 30-33.

Haskell, M. R. Socioanalysis and psychoanalysis. *Group Psychotherapy*, 15, 105-113.

Hastorf, A. H. The 'reinforcement' of individual actions in a group situation. In L. P. Ullmann (Ed.), *Research in behavior modification*. New York: Holt, Rinehart & Winston, 1965.

Hayakawa, S. I., & Goodfield, B. Reflections on a visit to Watts. *ETC.*, 1966, 23(2), 295-326.

Hays, W. L. *Statistics for psychologists*. New York: Rinehart & Winston, 1963.

Heckel, R. V., Wiggins, S. L., & Salzberg, H. C. Conditioning against silences in group therapy. *Journal of Counseling Psychology*, 1962, 13(2), 216-217.

Helmstadter, G. C. *Principles of psychological measurement*. New York: Appleton-Century-Crofts, 1964.

Hemphill, J. K. Group dimensions: A manual for their measurement. Research Monograph No. 87, Ohio State University, Bureau of Business Research, 1956.

Henry, N. (Ed.) *The dymanics of instructional groups.* Chicago: University of Chicago Press, 1960.

Hepako, M. Group psychotherapy with delinquent adolescent girls. American Journal of Orthopsychiatry, Jan., 1962, 32, 169-175.

Herbert, E. The use of group techniques in the training of teachers. Human Relations, 1961, 14(3), 251-253.

Hermatz, M. G. Verbal conditioning and change on personality measures. Journal of Personality and Social Psychology, 1967, 5(2), 175-185.

Hersko, M. Group psychotherapy with delinquent adolescent girls. American Journal of Orthopsychiatry, Jan., 1962, 32, 169-175.

Hertzman, J. Dynamic group experiences for teachers and students in the classroom. International Journal of Group Psychotherapy, Jan., 1959, 9, 99-100.

Hertzman, J., & Mueller, M. L. The adolescent in the school group. In M. Krugman (Ed.), Orthopsychiatry and the school. New York: American Orthopsychaitric Association, 1958. Pp. 225-234.

Hewer, V. H. Group counseling, individual counseling and a college class in vocations. Personnel and Guidance Journal, 1959, 37, 660-665.

Hicks, C. R. Fundamental concepts in the design of experiments. New York: Holt, Rinehart & Winston, 1964.

Hill, B. B. On being rather than doing in group psychotherapy. International Journal of Group Psychotherapy, 1958, 8, 154-160.

Hill, B. M., & Lieberman, H. Youth Corps counseling. The Vocational Guidance Quarterly, Sept. 28, 1966, 1-13.

Hill, W. F. Hill interaction matrix: A method of studying interaction in psychotherapy groups. University of Southern California, Youth Study Center, 1965.

Hill, W. F. A guide to understanding the structure and function of Hill Interaction matrix (HIM). University of Southern California, Youth Study Center, 1966.

Hill, W. F. Hill interaction matrix: Scoring manual. University of Southern California, Youth Study Center, 1966. (b)

Hill, W. F. Group therapy for social impact. American Behavioral Scientist, 1967, 10(1), 1-49. (a)

Hill, W. F. (Ed.) Group therapy for social impact: Innovation in training. American Behavioral Scientist, Sept. - Oct., 1967, 10(1). (b)

Hill, W. F., & Shmelev, V. N. An overview of group phenomena.

Hilton, T. L. Career decision-making. Journal of Counseling Psychology, 1962, 9, 291-298.

Hinckley, R. G., & Hermann, L. Group treatment in psychotherapy: A report of experience. Minneapolis: University of Minnesota Press, 1951.

Hobbs, N. Group psychotherapy in preventive mental hygiene. Teacher's College Record, Dec., 1948, 50, 170-173.

Hobbs, N. Group-centered psychotherapy. In C. R. Rogers (Ed.), Client-centered therapy. Cambridge: Riverside Press, 1951.

Hoch, E., & Kaufer, G. The process analysis of transient therapy groups. International Journal of Group Psychotherapy, 1955, 5, 415-421.

Hoffman, A. E. Journal of Consulting Psychology, 1949, 13, 190-195.

Hoffman, J. M., & Arsenian, J. Examination of some models applied to group structure and process. International Journal of Group Psychotherapy, April, 1965, XV, 131-133.

Holland, D. K. The Human Development Corporation: What it does and how it does it. St. Louis: Human Development Corporation, Jan., 1967.

Holland, J. L. Theory of vocational choice. Journal of Counseling Psychology, 1959, 6, 33-45.

Hollander, E. P., & Hunt, R. G. (Eds.) Current perspectives in social psychology. New York: Oxford University Press, 1963.

Hollingshead, A., & Redlich, F. Social class and mental illness. New York: John Wiley, 1958.

Holst, J. H. Problems in high school attendance. Educational Review, 1928, 75, 290-292.

Holz, W. C., & Azrin, N. H. Conditioning human verbal behavior. In W. K. Honig (Ed.), Operant behavior: Areas of research and application. New York: Appleton-Century-Croft, 1966.

Homans, G. The human group. New York, 1950.

Homans, G. Social behavior: Its elementary forms. New York: Harcourt, Brace & World, 1961.

Homme, L. E. Covergant control therapy: A special case of contingency management?

Hoover, E. The great group binge. Los Angeles Times West Magazine, Jan. 8, 1967.

Hora, T. Group psychotherapy, human values and mental health. International Journal of Group Psychotherapy, 1958, 8(2), 163-178.

Hora, T. Existential group psychotherapy. American Journal of Psychotherapy, 1959, 13, 83-92.

Hora, T. Existential psychiatry and group psychotherapy. American Journal of Psychoanalysis, 1961, 21, 58-73.

Horowitz, L. Transference in training groups and therapy groups. International Journal of Group Psychotherapy, April, 1964, 14.

Horowitz, M. W., & Perlmutter, H. V. The concept of the social group. Journal of Social Psychology, 1953, 37, 69-95.

Horowitz, S. The spontaneous drama as a technique in group therapy. The Nervous Child, 1945, 4, 253-273.

Hoyt, D. P. An evaluation of group and individual programs in vocational guidance. Journal of Applied Psychology, 1955, 39, 26-30.

Hoyt, K. B., & Moore, G. D. Group procedures in guidance and personnel work. Review of Educational Research, April, 1960, XXX(2), 158-167.

Hulse, W. C. The therapeutic management of group tension. American Journal of Orthopsychiatry, 1950, 20, 834-836.

Hulse, W. C. Group therapy. In W. Wolff, Contemporary psychotherapists examine themselves. Springfield, Ill.: Charles C. Thomas, 1956.

Hulse, W. C. Psychiatric aspects of group counseling with adolescents. Psychiatric Quarterly Supplement, 1960, 34, 307-313.

Human Story: 1966. New Haven: Community Progress, Inc., 1966.

Human Story: 1967. New Haven: Community Progress, Inc., 1967.

Hunt, J. McV. Concerning the impact of group psychotherapy on psychology. International Journal of Group Psychotherapy, Jan., 1964, XIV(1), 3-31.

Hurvitz, N. Group counseling with expectant mothers. Mental Hygiene, 1961, 45, 439-449.

Hyman, I., & Feder, B. Instituting group counseling in the public school. Psychology in the Schools, 1964, 1, 401-403.

Hyram, G. H. Socio-psychological concepts related to teaching the culturally disadvantaged. A mimeographed paper edited by T. P. Maher: A project of St. Louis University and the Fund for the Advancement of Education, 1967.

Illing, H. A. Training is group counseling and group psychotherapy. Psychoanalysis and Psychocnalytics Review, 1962, 49, 74-99.

International Society for General Semantics. General Information bulletin. No. 6.

Ivanov, N. V. A Soviet view of group therapy. International Journal of Psychiatry, 1966, 2(2).

Izard, C. E. Personal growth through group experience. In S. Tomkins & C. Izard (Eds.), Affect, cognition and personality: Empirical studies. New York: Springer Publications, 1965.

Jahoda, M. Current concepts of positive mental health. New York: Basic Books, 1958.

Jakubauskas, E. B., & Baumel, C. P. Human resources development. Ames: Iowa State University Press, 1967.

James, W. H., & Rotter, J. B. Partial and 100% reinforcement under chance and skill conditions. Journal of Experimental Psychology, 1958, 55, 397-403.

Jelinek, E. M., & Shakow, D. Unpublished manuscript.

Jenkins, D. H. Feedback and group self evaluation. Journal of Social Issues, 1948, IV, 50-60.

Jennings, H. H. Sociometric differentiation of the psychegroup and sociogroup. Sociometry, 1947, 10, 71-79.

Jewish Family and Children Service of Phoenix. A report. 1964.

Joel, W., & Shapiro, D. A genotypical approach to the analysis of personal interaction. Journal of Psychology, 1949, 28, 9-17.

Joel, W., & Shapiro, D. Some principles and procedures for group psychotherapy. Journal of Psychology, Jan., 1950, 29, 77-88.

Johnson, C. J. The transfer effect of treatment group composition on pupil's classroom participation. Unpublished doctoral dissertation. Stanford University, 1964.

Johnson, J. A. Group psychotherapy: A practical approach. New York: Grune & Stratton, 1959.

Jones, E. E., Gergen, K. J., & Davis, K. E. Some determinants of reactions to being approved or disapproved as a person. Psychological Monographs, 1962.

Jourard, S. The transparent self. Princeton: D. Van Nostrand, 1965.

Jourard, S. M. Counseling for authenticity. In Beck. Pp. 168-176.

Kagan, N. Group procedures. Review of Educational Research, April, 1966, XXXVI(2), 274-287.

Kanareffe, V. T., & Lanzetta, J. T. The acquisition of imitative and opposition responses under two conditions of instruction-induced set. Journal of Experimental Psychology, 1958, 56, 516-528.

Kanareffe, V. T., & Lanzetta, J. T. Effects of congruent social and task reinforcement upon acquisition of imitative responses. Psychological Reports, 1961, 8, 47-57.

Katz, E. W., Ohlsen, M. W., & Proff, F. C. An analysis through use of Kinescopes of the interpersonal behavior of adolescents in group counseling. Journal of College Student Personnel, 1959, 1, 2-10.

Katz, R. L. Empathy: Its nature and uses. New York: Free Press of Glencoe, 1963.

Kauffman, P. E., & Raimy, V. C. Journal of Abnormal and Social Psychology, 1949, 44, 379-385.

Kaufmann, W. Existentialism: From Dostoevsky to Sartre. New York: World Publishing Co., 1956.

Keach, E., Fulton, R., & Gardner, W. (Eds.) Education and social crisis: Perspectives on teaching disadvantaged youth. New York: John Wiley.

Kean, C. Some role playing experiments with high school students. Group Psychotherapy, 1954, 6, 256-265.

Kell, B. L., & Mueller, W. *Impact and change: A study of counseling relationships*. New York: Appleton-Century-Crofts, 1966.

Kelley, H. H., & Thibaut, J. W. Experimental studies of group problem solving and process. In G. Lindzey (Ed.), *Handbook of social psychology*. Vol. II. Cambridge: Addison-Wesley, 1954. Pp. 735-786.

Kelman, H. C. The role of the group in the induction of therapeutic change. *International Journal of Group Psychotherapy*, 1963, 13, 399-432.

Kelnar, J. Treatment of inter-personal relations in groups. *Journal of Social Issues*, 1947, 3(2), 29-34.

Kelsey, C. E. Group counseling: An annotated bibliography. *Journal of Psychological Studies*, 1960, 11, 84-92.

Keltner, J. *Group discussion process*. New York: Longmans Green, 1957.

Kemp, C. G. Behaviors in group guidance (Socio-process) and group counseling (psyche-process). *Journal of Counseling Psychology*, 1963, 10(4), 373-377.

Kemp, C. G. (Ed.) *Perspectives on the group process: A foundation for counseling with groups*. Boston: Houghton-Mifflin, 1964.

Kerlinger, F. N. *Foundations of behavioral research: Educational and Psychological inquiry*. New York: Holt, Rinehart & Winston, 1964.

Kessler, C. M. A. thesis. University of Chicago, 1947.

Khanna, R., & Khann, J. Theories of group psychotherapy. *Journal of Educational Psychology*, 1958, 16, 372-381.

Kierkegaard, S. *Fear and trembling* and *Sickness unto death*. Princeton: Princeton University Press, 1954.

King, G. F., & Armitage, S. G. An operant interpersonal therapeutic approach. to schizophrenics of extreme pathology. *American Psychologist*, 1958, 13, 358.

Kinnick, B. C., & Shannon, J. T. The effect of counseling on peer group acceptance of socially rejected students. *School Counselor*, 1965, 12, 162-166.

Kinzie, W. B., & Siprelle, C. Generalizations of verbally conditioned responses, Journal of Clinical Psychology, 1967, 23(2), 206-209.

Klapman, J. W. Group psychotherapy - Theory and practice. New York: Grune & Stratton, 1959.

Knowles, J. W. Group counseling. Englewood Cliffs, N. J.: Prentice-Hall, 1964.

Knowles, M., & Knowles, H. Introduction to group dynamics. New York: Association Press, 1959.

Knox, W. J. Acceptance of self, other people, and social conformity as effects. of group therapeutic experiences. Ph. D. dissertation. Pennsylvania State University, 1958.

Koenig, K. The manipulation of personality test scores by the technique of selective verbal reinforcement in a free verbal situation. Unpublished Master's thesis. University of Washington, 1962.

Koeppe, R., & Rothney, J. Evaluation of first steps in the counseling of superior students. Personnel and Guidance Journal, 1963, 42, 35-39.

Kilesar, J. Trenton's war on poverty. The Evening Times.

Konopka, G. Social group work: A helping process. Englewood Cliffs, N. J.: Prentice-Hall, 1963.

Kotkov, B. Bibliography of group therapy. Journal of Clinical Psychology, 1950, 6, 77-91.

Kraft, I. A. Some special considerations in adolescent group psychotherapy. International Journal of Group Psychotherapy, April, 1961, 11, 196-203.

Kraft, I. A. The nature of sociodynamics and psychodynamics in a therapy group of adolescents. International Journal of Group Psychotherapy, 10, 313-320.

Kranz, H. The Youth Opportunity Centers of the Public Employment Service. Washington, D. C: U. S. Department of Labor, June, 1966.

Krasner, L. S. A comparison of the effectiveness of two psychotherapy techniques in the resolution of post-hypnotic conflict. Journal of Clinical and Experimental Hypnosis, 1954, 2, 55-75.

Krasner, L. The use of generalized reinforcers in psychotherapy research. Psychological Reports, 1955, 1, 19-25.

Krasner, L. Studies of the conditioning of verbal behavior. Psychological Bulletin, 1958, 5(3), 55. (a)

Krasner, L. A technique of investigating the relationship between verbal cues of examiner and verbal behavior of patients. Journal of Consulting Psychology, 1958, 22, 364-366. (b)

Krasner, L. The therapist as a social reinforcement machine. In H. H. Strupp, & L. Luborsky (Eds.), Research in psychotherapy. Washington, D. C.: American Psychological Association, 1962, 2, 61-94.

Krathwohl, D. R. How to prepare a research proposal. New York: Syracuse University, 1965.

Krieger, M., & Kogan, W. S. A study of group processes in small therapeutic group. International Journal of Group Psychotherapy, April, 1964, XIV (2), 178-188.

Krugman, M. (Ed.) Orthopsychiatry and the school. New York: American Orthopsychiatric Association. 1958.

Krumboltz, J. D. The parable of the good counselor. Personnel and Guidance Journal, 1964, 34, 118-124.

Krumboltz, J. D. Behavioral counseling: Rationale and research. Personnel and Guidance Journal, 1965, 44, 376-382.

Krumboltz, J. D. (Ed.) Revolution in counseling Boston: Houghton - Mifflin, 1966.

Krumboltz, J. D. A behavioral approach to group counseling and therapy. Journal of Research and Development in Education, 1968, 1, 3-18.

Krumboltz, J. D., & Ryan, I. A. Effect of planned reinforcement counseling on client decision making behavior. Journal of Counseling Psychology, 1964, XI(4), 315-425.

Krumboltz, J. D., & Schroeder, W. W. Promoting career exploration through reinforcement. Personnel and Guidance Journal, 1965, 44, 19-26.

Krumboltz, J. D., & Thoresen, C. E. The effect of behavioral counseling in group and individual settings on information seeking behavior. Journal of Counseling Psychology, 1964, 11(4), 324-33.

Krumboltz, J. D., Varenhorst, B. B., & Thoresen, C. E. Non-verbal factors in the effectiveness of models in counseling. Journal of Counseling Psychology, 1967, 14, 419-425.

Kuaraceus, W. C., & Miller, W. B. Delinquent behavior: Culture and the individual. Washington, D. C.: National Education Association, 1959.

Lakin, M., & Carson, R. C. Participant perception of group process in group sensitivity training. International Journal of Group Psychotherapy, Jan., 1964, 14(1), 116.

Lakin, M., & Carson, R. A therapeutic vehicle in search of a theroy of therapy. Journal of Applied Behavioral Science, 1966, 2(1).

Lang, P. J., & Lazovik, A. D. The experimental desensitization of a phobia. Journal of Abnormal Social Psychology, 1963, 66, 519-525.

Langner, T. Comparison of experience and behavior of lower and higher status groups: Findings and hypotheses. Reprinted from Life and stress and mental health. New York: The Free Press of Glencoe, 1963. Pp 466-467.

Lasoff, B. A definition of group vocational guidance. Counselor's Information Service (Supplement), 1952.

Laughlin, H. P. A group approach to management improvement. International Journal of Group Psychotherapy, 1954, 4, 165-171.

Lawrence, R. M., & Kiellm, N. Group guidance with college students. International Journal of Group Psychotherapy, Jan., 1961, 11, 78-87.

Lazarus, A. A. Group therapy of phobic disorders by systematic desensitization. Journal of Abnormal and Social Psychology, 1961, 63, 504-510.

Lazarus, A. A. Group therapy of phobic disorders by systematic desensitization. In Ullman, L. P., & Krasner, L. (Eds.), Case Studies in behavior modification. New York: Holt, Rinehart, & Winston, 1965. Pp. 208-217.

Leary, T. Multilevel measurement of interpersonal behavior: A manual. Berkeley: Psychological Consultation Service, 1956.

Leary, T. Interpersonal diagnosis of personality. New York: Ronald Press, 1957.

Lecky, P. Self-consistency. New York: Island Press, 1945.

Leiboder, M. N. Effects of therapist style on interaction in psychotherapy groups. University of Utah, 1962.

Leopold, H. S. The problem of working through group psychotherapy. International Journal of Group Psychotherapy, July, 1959, 9, 287-292.

Levitt, M., & Rubenstein, B. O. Acting out in adolescence: A study in communication. American Journal of Orthopsychiatry, 1959, 29, 622-632.

Lewin, K. The dynamics of group action. Educational leadership, Jan., 1944, 1, 195-200.

Lewin, K. Frontiers in group dynamics. In Field theory in social science. New York: Harper Brothers, 1951.

Lewin, K. Lippitt, R., & White, R. Patterns of aggressive behavior in experimentally created 'social climates'. Journal of Social Psychology, 1939, 10, 271-299.

Liddell, H. Emotional hazards in animals and man. Springfield: Charles C. Thomas, 1956.

Lifton, N., & Smolen, E. M. Group psychotherapy with schizophrenic children. International Journal of Group Psychotherapy, Jan., 1966, 16(1), 23-41.

Lifton, W. Group therapy in educational institutions. Review of Educational Research, April, 1954, 24(2), 156-163.

Lifton, W. M. Working with groups, New York: John Wiley, 1966.

Lindt, H. The nature of therapuetic interaction of patients in groups. International Journal of Group Psychotherapy, 1958, 8, 55-69.

Lipkin,S. Journal of Consulting Psychology, 1948, 12, 137-146.

Lippitt, G. L. Implications of group dynamics research in the development of teachers and counselors. SPATE, 1966-67, 5(3), 1-7.

Lippitt, R. An experimental study of the effect of democratic and authoritarian group atmospheres. University of Iowa Studies of Child Welfare, 1940, 16, 43-195.

Lippitt, R., & Hubbell, A. Role playing for personnel and guidance workers: A reivew of the literature with suggestions for applications. Group Psychotherapy, 1956, 9, 39-114.

Lipton, L., & Blanton, R. L. The semantic differential and mediated generalization as measures of meaning. Journal of Experimental Psychology, 1957, 54, 431-437.

Lodato, F. J., & Sokoloff, M. A. Group counseling for slow learners. Journal of Counseling Psychology, 1963, 10, 95-96.

Loeser, L. H. Some aspects of group dynamics. International Journal of Group Psychotherapy, Jan., 1957, 7(1), 5-9.

Low, A. A. Mental health through will-training. Boston: Christopher Press.

Lowry, R. A continuum classification of human groups. Pacific Soc. Review, 1958, 1, 87.

Lubin, B., & Lubin, A. W. Group psychotherapy: A bibliography of the literature from 1956-1964. East Lansing: Michigan State University Press, 1966.

Luchins, A. S. Methods of studying the progress and outcomes of a group psychotherapy program. Journal of Consulting Psychology, 1947, 11, 173-183.

Luchins, A. S. A social-experimental approach to group psychotherapy. Journal of Social Psychology, 1955, 42, 121-127.

Luchins, A. S. An approach to evaluating the achievements of group psychotherapy. Journal of Social Psychology, 1960, 52, 345-353.

Luchins, A. S. Group therapy. New York: Random House, 1964.

Luft, J. Group process: An introduction to group dynamics. Palo Alto, California: National Press, 1963.

Luft, J. Group process: An introduction to group dynamics. Palo Alto, California: National Press, 1965.

Maas, J. The use of actional procedures in group psychotherapy with sociopathic women. International Journal of Group Psychotherapy, April, 1966, 16(2), 190-197.

Maccoby, E., Newcomb, T. M., & Haefley, E. L. (Eds.). Readings in social psychology. New York: Holt, Rinehart & Winston, 1958.

MacLennan, B., & Kein, W. L. Utilization of groups in job training for the socially deprived. International Journal of Group Psychotherapy, Oct., 1965, 424-433.

Mac Namera, M. Helping children through their mothers. Journal of Child Psychology and Psychiatry and Allied Disciplines, Jan., 1963, 4, 29-46.

Maher, T. P., & Mosby, R. S. (Eds.). Proceedings of the workshop in human relations and group guidance. Human Relations Center For Training and Research, St. Louis University, St. Louis, Missouri, June-July, 1966.

Mahler, C. A., & Caldwell, E. Group counseling in the secondary schools. Chicago: Science Research Associates, 1961.

Malamud, D. I., & Machover, J. Toward self-understanding: Group techniques in self-confrontation. Springfield; Charles C. Thomas, 1965.

Malone, T. P. Analysis of the dynamics of group psychotherapy based upon observation in twelve-month experimental programs. Journal Personality, March, 1948, 16, 245-277.

Maltzman, I., Simon, S., Raskin, D., & Licht, L. Experimental studies in the training of originality. Psychological Monographs, 1960., 74, 493.

Manheim, H. L. Intergroup interaction as related to status and leadership differences between groups. Sociometry, 1960, 23, 415-427.

Manheim, H. L. Experimental demonstration of relationship between group characteristics and patterns of intergroup interaction. Pacific Soc. Review, 1963, 6, 25-29.

Mann, J. Group therapy with adults: General observations. American Journal of Orthopsychiatry, 1953, 23, 332-337.

Mann, J. H. The effect of role playing experience on self ratings of interpersonal adjustment. Group Psychotherapy, 1958, 11, 27-32.

Mann, R. D. Interpersonal styles and group development. New York: John Wiley Sons, 1967.

March, J. (Ed.) Handbook of organizations. Chicago: Rand-McNally, 1965.

Margolin, J. B. The use of an interaction matrix to validate patterns of group behavior. Human Relations, 1952, 5, 407-416.

Martin, E. A., & Hill, W. F. Toward a theory of group development: Six phases of therapy group development. International Journal of Group Psychotherapy, 1957, 7, 20-30.

Maslow, A. H. Motivation and personality. New York; Harper & Brothers., 1954.

Maslow, A. H. Toward a psychology of being. New York: D. Van Nostrand, 1962.

Mather, T. P. Communications skills and mental health. Guild of Cath. Psychiatrists Bulletin, April, 1960, 7(2).

Mathews, E. M. Try a student-centered approach to occupational information. Business Educational World, April, 1963, 43, 264.

May, R. Existential psychology. New York: Random House, 1961.

May R. (Ed.), Existential psychology, New York: Random House, 1965.

May, R., Angel, E., & Ellenberger, H. F. Existence. New York: Basic Books, 1958.

McBrearty, J. F., Marston, A. R., & Kanfer, F. H. Conditioning a verbal operant in a group setting: Direct vs. vicarious reinforcement. American Psychologist, 1961, 16, 425.

McCormick, C. G. Objective evaluation of the process and effects of analytic group psychotherapy with adolescent girls. International Journal of Group Psychotherapy, April, 1953, 3, 181-190.

McDaniel, H. B. Counseling perspectives: Old and new. In John D. Krumboltz (Ed.). Revolutions in counseling: Implications of behavioral science. New York: Houghton-Mifflin, 1966. Pp. 79-93.

McDaniel, H., & Johnson, B. A. Effects of group counseling on achievers and underachievers. Journal of Secondary Education, 1962, 37, 136-139.

McDaniel, W. Evaluation of the use of group therapeutic techniques for vocational rehabilitation. Group Psychotherapy, 16, 255-259.

McGough, N. E., & Boling, J. New dimensions in employment service counseling, 1-12.

McGowan, J. F., & Porter, T. L. An introduction to employment service counseling. University of Missouri, 1964.

McGrath, J., & Altman, I. Small group research: A synthesis and critique of the field. New York: Rinehart & Winston, 1966.

McNair, D. M. Reinforcement of verbal behavior. Journal of Experimental Psychology, 1957, 63, 40-46.

Mead, M. Group psychotherapy in the light of social anthropology. International Journal of Group Psychotherapy, 1951, 1, 193-199.

Merbaum, M., & Southewell, E. A. Conditioning of affective self references as a function of the discriminate characteristics of experimenter intervention. Journal of Abnormal Psychology, 1965, 70(3), 180-187.

Michael, D. Cybernation and social change. Washington, D. C.: U. S. Department of Labor, Manpower Administration, 1964.

Michael, J., & Meyerson, L. Behavioral approach to counseling and guidance. Harvard Educational Review, 1962, 32, 382-402.

Miles, M. Learning to work in groups. New York: Teachers College Press, 1959.

Miller, D. H. Staff training in the penal system: The use of small groups. Human Relations, 1966, 19(2), 151-164.

Miller, D. R. The study of social relations: Situation, identity and social interaction. In S. Koch (Ed.), Psychology: A study of a science. Vol. 5. New York: McGraw-Hill, 1962. Pp. 639-737.

Miller, G. Language and communication. New York: McGraw-Hill, 1951.

Miller, K. M., & Biggs, J. B. Attitude change through undirected group discussion. Journal of Educational Psychology, 1958, 49, 224-228.

Miller, K. S., & Grigg, C. M. (Eds.). Mental health and the lower social class. Florida State University Studies, No. 49, The Florida State University, 1966, 102.

Miller, N. E., & Dollard, J. Social learning and imitation. New Haven: Yale University Press, 1941.

Morehead, C. G., & Johnson, J. Some effects of a faculty advising program. Personnel and Guidance Journal, 1964, 43, 139-144.

Moreno, J. L. Group method and group psychotherapy. Sociometry Monographs, New York: Beacon House, 1932, 5.

Moreno, J. L. Who shall survive? Nerv. Ment. Monograph No. 58. Washington, D. C., 1934.

Moreno, J. L. Sociodramatic approach to minority problems. Group Psychotherapy, 1952, 5, 7-19.

Moreno, J. L. Psychodrama. In Silvano Arieti (Ed.). American handbook of psychiatry. Vol. II. New York: Basic Books, 1959. Pp. 1375-1396.

Moreno, J. L. Role theory and the emergency of the self. Group Psychotherapy, 1962, 15, 114-117.

Moreno, J. L. The actual trends in group psychotherapy. Group Psychotherapy, 1963, 16, 117-131.

Moreno, J. L. The actual trends in group psychotherapy. Group Psychotherapy, 1964, 17, 149, 171.

Moreno, J. L. (Ed.). The international handbook of group psychotherapy. New York: The Philosophical Library, 1966.

Moreno, J. L., & Moreno, Z. Psychodrama. New York: Beacon House, 1959.

Moreno, Z. A survey of psychodramatic techniques. Group Psychotherapy, 1959, 12, 5-12.

Moreno, Z. Psychodramatic rules, techniques and adjunctive methods. Group Psychotherapy, 1965, 18, 73-86.

Mosak, H. Ph. D. Dissertation, University of Chicago, 1948.

Mosby, R. S. (Ed.). Proceedings of the workshop in human relations and group guidance. Human Relations Center for Training and Research, St. Louis University, St. Louis, Missouri, June-July, 1965.

Mosby, R. S. A seminar for teachers of the culturally disadvantaged. St. Louis University, St. Louis, Missouri, 1967.

Mosher, R. L., Carle, R. F., & Kehas, C. D. (Eds.). Guidance: An examination. New York: Harcourt, Brace & World, 1965.

Mowrer, O. H. Learning theory and behavior. New York: Wiley & Sons, 1960.

Mowrer, O. H. The new group therapy. Princeton: D. Van Nostrand, 1964.

Moyer, P. C. An investigation of the effects of leader verbal reinforcement of understanding responses in groups of student nurses. Unpublished Doctoral Dissertation. Tempe: Arizona State University, 1967.

Muench, G. A. Applied Psychological Monographs, 1947, 13, 1-163.

Mullan, H., & Rosenbaum, M. Group psychotherapy: Theory and practice. New York: Free Press of Glencoe, 1962.

Munroe, R. Schools of psychoanalytic thought. New York: Dryden Press, 1955.

Munzer, J., & Greenwalk, H. Interaction process analysis of a therapy group. International Journal of Group Psychotherapy, 7, 175-190.

Murray, E. J. The content analysis method of studying psychotherapy. Psychological Monographs, 1956, 70(13).

Murray, J. P., & Murray, C. E. *Guidelines for group leaders.* Whiteside, Inc., William Morrow, 1954.

Nash, E. H., Frank, J. D., Gliedman, L. H., Imber, S. D., & Stone, A. R. Some factors related to patients remaining in group psychotherapy. *International Journal of Group Psychotherapy,* 1957, 7, 264-274.

National Training Laboratories. *An annotated bibliography of research:* 1947-1960. Washington, D. C.: National Education Association, 1960.

Neighborhood Youth Corps education component curriculum. New Haven, Connecticut.

Neubaner, P. B. Basic considerations in the application of therapy and education to parent groups. *International Journal of Group Psychotherapy,* July, 1953, 3, 315-319.

Neuman, J. B. A rationale for a definition of communication skills and mental health. *Guild of Catholic Psychiatrists Bulletin,* 1960, 7(2).

Newburger, H., & Schauer, G. *Sociometric evaluation of group psychotherapy.* Group Psychotherapy, 1953, 6, 7-20.

Newcomb, T. M. Role behaviors in the study of individual personality and of groups. *Journal of Personality,* 1950, 18, 273-289,

Newcomb, T. M. *The acquaintance process*. New York: Holt, Rinehart & Winston, 1961.

Newcomb, T. M., & Hartley, E. L. (Eds.). *Readings in social psychology*. New York: Holt, Rinehart & Winston, 1947.

Newman, J. B. A rationale for a definition of communication. *Journal of Communication*, Sept., 1960, 10(3) 115-124.

Noble, C. E. An analysis of meaning. *Psychological Review,* 1952, 59, 421-430.

Noble, R., Ohlsen, M., & Proff, F. A method for the quantification of psychotherapeutic interaction in counseling groups. *Journal of Counseling Psychology*, 1961, 8, 54-61.

Nuthmann, A. M. Conditioning of a response class on a personality test. *Journal of Abnormal and Social Psychology,* 1957, 54, 19-23.

Oakes, W. F. Reinforcement effects of participation in group discussion. *Psychological Report*, 1960, 7, 503-514.

Ofman, W. Evaluation of a group counseling procedures. Journal of Counseling Psychology, 1964, 11(2), 152-159.

Ohlsen, M. M. Counseling within the group setting. National Association of Women Deans and Counselors Journal, 1964, 23, 104-109.

Ohlsen, M. M. Adapting principles of group dynamics for group counseling. The School Counselor, March, 1966, 13(3), 159-162.

Ohlsen, M. M. Implications of research on group process for secondary schools. University of Illinois (Unpublished paper).

Ohlsen, M. M. & Gazda, G. M. Group counseling with parents of pre-adolescent underachievers. Group Psychotherapy, Sept., 1963.

Ohlsen, M. M., & Johnson, H. Group counseling evaluated by blind analysis and projective techniques. Journal of Counseling Psychology, 1962, 9, 359.

Ohlsen, M. M., & Oelke, M. C. An evaluation of discussion topics in group counseling. Journal of Counseling Psychology, 1962, 18, 317-322.

Ohlsen, M., & Proff, F. C. The extent to which group counseling improves the academic and personal adjustment of underachieving gifted adolescents. Cooperative research project No. 623, College of Education, University of Illinois. Urbana, Illinois, Mimeographed, 1960, 171.

Ohlsen, M. M., & Wright, E. W. Comparison of individual and multiple counseling for test interpretation interviews. Journal of Counseling Pyschology-1963, 10, 126-135.

Oldridge, B. Two roles for elementary school guidance personnel. Personnel and Guidance Journal, 1964, 43, 367-370.

Olmsted, M. S. The small group. New York: Random House, 1959.

Orton, J. W. Areas of focus in supervising counseling practicum students in groups. Personnel Guidance Journal, 1965, 44(2), 167-170.

Oshey, B., & Harrison, R. Transfer from here and now to there and then: Changes in organizational problem diagnosis from T-group training. Journal of Applied Behavioral Sciences, 1966, 2(2).

Papanek, H. Expression of hostility: its value in the psychotherapy group. International Journal of Group Psychotherapy, 1962, 18, 62-67.

⑤

Parloff, M. B. Group dynamics and group psychotherapy: The state of the union. International Journal of Group Psychotherapy, 1963, 13, 393-398.

Parrish, M. Group techniques with teen-age emotionally disturbed girls. Group Psychotherapy, 1961, 14, 20-25.

Parsons, E. D., & Shepard, W. H. Causes of leaving school. School and Society, 1916, 3, 791-793.

Passow, H. A. (Ed.). Education in depressed areas. New York: Columbia Teachers College Press, 1963.

Patten, B. B. Group counseling with teacher and teacher-student perceptions of behavior. Unpublished doctoral dissertation. Tempe: Arizona State University, 1967.

Patterson, C. H. Counseling and guidance in schools. New York: Harper & Row, 1962.

Patterson, C. H. Counseling as a relationship. In C. E. Beck, (Ed.). Guidelines for guidance. Dubuque, Iowa: William C. Brown Co., 1966, 113-119. (a).

Patterson, C. H. Theories of counseling and psychotherapy. New York: Harper & Row, 1966. (b)

Pattison, E. M. Evaluation studies of group psychology. International Journal of Group Psychotherapy, July, 1965, 15(3), 382-397.

Paul, G. L., & Shannon, D. R. Treatment of anxiety through systematic desensitization in therapy groups. Journal of Abnormal Psychology, 1966, 71, 124-135.

Pearl, A., & Riessman, F. New careers for the poor. New York: Free Press, 1965.

Pearson, R. E. Group vs. 'mass' procedures -- for what? The School Counselor, 1966, 14, 97-100.

Peck, H. B. Group psychotherapy and mental health. International Journal of Group Psychotherapy, 1951, 1, 301-310.

Peck, H. B. The group in education, group work and psychotherapy. American Journal of Orthopsychiatrists, 1954, 25, 128-152.

Peck, H. B. Some relationships between group process and mental health phenomena in theory and practice. International Journal of Group Psychotherapy, July, 1963, 13(3), 269-289.

Peck, R. F., & Havighurst, R. J. The psychology of character development. New York: John Wiley, 1961.

Perezez, J. F. Counseling: Theory and Practice. Cambridge: Addison-Wesley, 1965.

Perry, H., & Gawel, M. (Eds.). The collected works of Harry Stack Sullivan. Two Vols. New York: W. W. Norton.

Peters, H. N., & Jenkins, R. L. Improvement of chronic schizophrenic patients with guided problem-solving motivated by hunger. Psychiatric Quarterly Supplement, 1954, 28, 84-101.

Petrullo, L. Small group research. In A. J. Bachrack (Ed.). Experimental Foundations of clinical psychology. New York: Basic Books, 1962.

Petrullo, L., & Bass, B. (Eds.). Leadership and interpersonal behavior. New York: Holt, Rinehart & Winston, 1961.

Phares, E. J. Perception threshold decrements as a function of skill and chance expectancies. Journal of Psychology, 1962, 53, 399-40.

Philbrick, E., & Postman, L. A. A further analysis of 'learning without awareness'. American Journal of Psychology, 1955, 68, 417-424.

Phillips, R. E. Group size and text anxiety in a simulated group verbal conditioning situation. Unpublished doctoral dissertation. University of Washington, 1965.

Philip, H., & Dunphy, D. Developmental trends in small groups. Sociometry, 1959, 22, 162-174.

Polansky, N., Lippett, R., & Redl, F. The use of near-sociometric data in research on group treatment processes. Sociometry, 1950, 13(1), 39-62.

Polsky, H. W. Cottage six: The social system of delinquent boys in residential treatment, (Russell Sage Foundation). New York: John Wiley, 1962.

Powdermaker, F., & Frank, J. Group psychotherapy: Studies in methodology of research and therapy. Cambridge: Harvard University Press, 1953.

A primer of short-term counseling. Philadelphia: Youth Study Center.

Program for the educationally disadvantaged. Health, Education and Welfare Department Bulletin 35044, Supt. of Documents, 1963.

Project: School dropouts. National Education Association of the United States, April, 1963, 1-16.

Psathas, G. Phase movement and equilibrium tendencies in interaction process in psychotherapy groups. *Sociometry,* June, 1960, 23, 177-194.

Psathas, B., & Hardert R. Trainer interventions and normative patterns in the T-group. *Journal of Applied Behavioral Science,* 1966, 2(2).

Raimy, V. C. Unpublished doctoral dissertation. Ohio State University, 1943.

Raven, B. The dynamics of groups. *Review of Educational Research*, 1959, 29, 332-343.

Razran, G. H. S. Conditioning away social bias by the luncheon technique. *Psychological Bulletin,* 1938, 35, 693.

Razran, G. H. S. Conditioned response changes in rating and appraising socio-political slogans. *Psychological Bulletin*, 1940, 37, 481.

Razran, G. H. S. Stimulus generalization of conditioned responses. *Psychological Bulletin,* 1949, 46, 337-365.

Redl, F. Resistance in therapy groups. *Human Relations*, August, 1948, 1, 307,313.

Redl, F. New ways of ego support in residential treatment of disturbed children. *Bulletin of the Menninger Clinic*, 1949, 13, 60-66.

Redl, F. *When we deal with Children: Selected writings*. New York: Free Press of Glencoe, 1966.

Redl, F. The concept of a therapeutic milieu. *American Journal of Orthopsychiatry,* 29, 721-736.

Richard, H. Selected group psychotherapy evaluation studies. *Journal of General Psychology*, 1962, 67, 35-49.

Richardson, H., & Borrow, H. Evaluation of a technique of group orientation for vocational counseling. *Educational and Psychological Measurement,* 1952, 12, 587, 597.

Richmond, J. F., & Buehler, R. E. Interpersonal communication: A theoretical formulation. *Journal of Communication,* March, 1962, 12(1), 3-10.

Rieken, H. W., & Homans, G. C. Psychological aspects of social structure, In G. Lindzey (Ed.). *Handbook of social psychology*. 1954, 2, 786-832.

Riessman, F. The culturally deprived child. New York: Harper & Row, 1962, (a)

Riessman, F. Programs for the educationally disadvantaged. Washington, D. C.: Department of Health, Education and Welfare, 1962. (b)

Riessman, F. Some suggestions concerning psychotherapy with blue-collar patients. (Mimeograph) Mobilization for Youth, 1962. (c)

Riessman, F. Role-playing and the lower socio-economic group. Group Psychotherapy, 1964, 17, 36-48.

Riessman, F., Cohen, J., & Pearl, A. Mental health of the poor: New treatment approaches for low income people. New York: Free Press of Glencoe, 1964.

Riessman, F., & Goldfarb, J. Role-playing and the poor. Dec., 1963.

Rinn, J. L. Group guidance: Two processes. Personnel and Guidance Journal, 1961, 39, 591-594.

Roe, A. Early determinants of vocational choice. Journal of Counseling Psychology, 1957, 4, 212-217.

Roe, A., & Siegelmen, M. The origins of interests. Washington, D. C.: American Personnel and Guidance Association, 1964.

Rogers, C. R. Client-centered therapy. Boston: Houghton-Mifflin, 1951.

Rogers, C. R. On becoming a person. Boston: Houghton-Mifflin, 1961. (a)

Rogers, C. R. Two divergent trends. In R. May (Ed.). Existential psychology. New York: Random House, 1961. (b)

Rogers, C. R. Some elements of effective interpersonal communication. La Jolla, California: Western Behavioral Sciences Institute, 1964.

Rogers, C. R. The interpersonal relationship: The core of guidance. In R. Mosher, et. al., (Eds.). Guidance: An examination. New York: Harcourt, Brace & World, 1965. Pp. 49-65. (a)

Rogers, C. R. The necessary and sufficient conditions of therapeutic personality change. In J. F. Adams (Ed.). Counseling and guidance: A summary view. New York: MacMillan Co., 1965. Pp. 130-141. (b)

Rogers, C. R. A plan for self-directed change in an educational system. Educational Leadership, May, 1965, 1-15. (c)

Rogers, C. R. Being in relationship. Lecture given at APGA Convention, Dallas, Texas, March, 1967. (a)

Rogers, C. R. A plan for self-directed change in an educational system. Educational Leadership, May, 1967, 1-15. (b)

Rogers, C. R. The process of the basic encounter group. In J. F. T. Bugental (Ed.). Challenges of humanistic psychology. New York: McGraw-Hill, 1967.

Rogers, C. R., & Dymond, R. F. Psychotherapy and personality change. Chicago: The University of Chicago Press, 1954.

Rogers, J. M. Operant conditioning in a quasi-therapy setting. Journal of Abnormal Sociology and Psychology, 1960, 68, 247-252.

Rogers, N. Personal counselor. 1948, 3, 237-265.

Rose, S. Applications of Karen Horney's theories to group analysis. International Journal of Group Psychotherapy, 1953, 3, 270-279.

Roseborough, M. Experimental studies of small groups. Psychological Bulletin, 1953, 50, 275-303.

Rosenbaum, M. Group psychotherapy and psychodrama. In B. Wolman (Ed.) Handbook of clinical psychology. New York: McGraw-Hill, 1965.

Rosenbaum, M., & Bergen, M. (Eds.). Group psychotherapy and group function. New York: Basic Books, 1963.

Rosenbaum, M., & Hartley, E. A summary review of current practices of ninety-two group psychotherapists. International Journal of Group Psychotherapy, 1962, 12, 194-298.

Rosenthal, D. Changes in some moral values following psychotherapy. Journal of Consulting Psychology, 1955, 19, 431-436.

Ross, M., & Henry, C. E. New understanding of leadership. New York: Association Press, 1957.

Rossberg, R. H., & Jacques, M. The role of the group in patient evaluation, counseling, and management. Personnel and Guidance Journal, 1961, 40, 135-142.

Rothaus, P., Johnson, D. L., Hanson, P. G., Lyle, R. A., & Moyer, R. Participation and sociometry in autonomous and trainer-led patient groups. Journal of Counseling Psychology, 1966, 13, 68-76.

Rothney, J. Guidance practices and results. New York: Harper Brothers, 1958.

Rotter, J. B., Liverant, S., & Crowne, D. P. The growth and extinction of expectancies in chance controlled and skilled tasks. Journal of Psychology, 1961, 52, 161-177.

Rousseve, R. J. A counselor education pilot project in 'guided' group interaction. Personnel and Guidance Journal, 1965, 44, 52-57.

Ruble, R. A. Counseling the culturally alienated: Some propositions in search of theory. Thirteenth Annual National Catholic Guidance Conference, March 19, 1967.

Ruesch, J., & Bateson, G. Communication: The social matrix of psychiatry. New York: W. W. Norton, 1951.

Ruesch, J., & Bateson, G. Communication: The social matrix of psychiatry. New York: Ronald Press, 1966.

Ruttledge, A., & Gass, G. Nineteen Negro men. San Francisco: Jossey-Bass, 1967.

Ryan, T. A., & Krumboltz, J. D. Effect of planned reinforcement counseling on client decision-making behavior. Journal of Counseling Psychology, 1964, 11, 315-323.

Sacks, J. M., et. al. Changes in perception and interaction in group therapy. Group Psychotherapy, 1960, 13, 101-109.

Salzburg, H. C., Brokaw, J. R., & Strakleg, D. F. Effects of group stability on spontaneity and problem-relevant behavior in group psychotherapy. Psychological Reports, 1964, 4, 687-694.

Salzinger, K. Experimental manipulation of verbal behavior; A review. Journal of General Psychology, 1959, 61, 65-94.

Salzinger, K., & Pisoni, S. Reinforcement of verbal affect responses of normal subjects during the interview. Journal of Abnormal and Social Psychology, 1960, 60(1), 127-130.

Sanborn, M. P. A comparison of four high school guidance programs in terms of four criteria. Personnel and Guidance Journal, 1964, 43, 293-98.

Sarason, B. R. The effects of verbally conditioned response classes on post-conditiong task. *Dissertation Abstracts*, 1957, 12, 679.

Sarason, S. B., Levine, M., Goldenberg, I. I., Cherlin, D. L., & Bennett, E. M. *Psychology in community settings*. New York: John Wiley & Sons, 1966.

Sarbin, T. R. Role theory. In G. Lindzey (Ed.). *Handbook of social psychology*. Vol. 1. Cambridge: Addison-Wesley, 1954.

Sargent, S. S., & Williamson, R. C. *Social psychology*. New York: Ronald Press, 1966.

Satir, V. *Conjoint family therapy*. Science and Behavior Books, 1964.

Scheidlinger, S. Group psychotherapy. *American Journal of Orthopsychiatrists*, 1954, 24, 140-145.

Scheidlinger, S. The relationship of group therapy to other group influence attempts. *Mental Hygiene*, 1955, 39, 376-390. (a)

Scheidlinger, S. Should teachers be group therapists? *Progressive Education*, May, 1955, 32, 70-74.

Scheidlinger, S. Group process in group psychotherapy. *American Journal of Psychotherapy*, 1960, 14, 104-120 & 346-363.

Scheidlinger, S. Experiential group treatment of severely deprived latency-age children. In F. Riessman, G. Cohen, & A. Pearl (Eds.). *Mental Health of the poor*. New York: Free Press of Glencoe, 1964. (a)

Scheidlinger, S. Identification, the sense of belonging and identity in small groups. *International Journal of Group Psychotherapy*, July, 1964, 14(3), 291-306.

Schein, E. H. The effect of reward on adult imitative behavior. *Journal of Abnormal and Social Psychology*, 1954, 49, 389-395.

Schein, E. H., & Bennis, W. G. *Personal and organizational change through group methods*. New York: John Wiley & Sons, 1965.

Schiffer, M. The therapeutic group in the public elementary school. In M. Krugman (Ed.). *Orthopsychiatry and the school*. New York: American Orthopsychiatric Association, 1958, 70-81.

Schindler, W. The 'group personality' concept in group psychotherapy. *International Journal of Group Psychotherapy*, 1952, 2, 331-315.

Schlien, J. M., Mosak, H. H., & Dreikurs, P. Effect of time limits: A Comparison of client-centered and adlerian psychotherapy. University of Chicago Library Counseling Center discussion papers, 1960, 6(8).

Schmidt, L. D., & Pepinsky, H. B. Counseling research in 1963. Journal of Counseling Psychology, 1965, 12, 418-427.

Schofield, W. Psychotherapy: The purchase of friendship. Englewood Cliffs: Prentice-Hall, 1964.

Schreiber, D. (Ed.). Guidance and the school dropout. Washington, D. C.: NEA and APGA, 1964.

Schroder, H., Driver, M., & Streufert, S. Human information processing: Individuals and groups functioning in complex social situations. New York: Holt, Rinehart & Winston, 1967.

Schulman, I. Modifications in group psychotherapy with anti-social adolescents. International Journal of Group Psychotherapy, July, 1957, 7(3), 310-317.

Schutz, R. E., & Baker, R. L. Curriculum research: Paradigms and procedures, Tempe: Arizona State University, Bureau of Educational Research and Services Bulletin No. 22, 1966.

Schutz, W. Joy: Exanding human awareness. New York: Grove Press, 1967.

Schutz, W. D. FIRO: A three-dimentional theory of interpersonal behavior. New York: Holt, Rinehart, & Winston, 1958.

Schwartz, E., & Wolfe, A. Psychoanalysis in groups: Three primary parameters. American Imago., 1957, 14, 281-297.

Schwartz, E. K., & Wolfe, A. Psychoanalysis in groups: The mystique of group dynamics. In Topic, problem psychotherapy. Vol. II. New York: Kargen-Basel, 1960.

Seabourne, B. The action sociogram. Group Psychotherapy, 1963, 16, 145-155.

Sechrest, L. B., & Barger, B. Verbal participation and perceived benefit from group psychotherapy. International Journal of Group Psychotherapy, Jan., 1961, 11(1), 49-59.

Seeman, J. Journal of Consulting Psychology, 1949, 13, 157-168.

Segal, S. A psychoanalytic analysis of personality factors in vocational choice. Journal of Counseling Psychology, 1961, 8, 202-210.

Semrad, E. V., & Arsenion, E. J. The use of group processes in teaching group dynamics. American Journal of Psychiatry, 1951, 108, 358-363.

Sensitivity training. Chicago: Encyclopedia Britannica Library Research Service. 1-6.

Severin, F. Humanistic viewpoints in psychology. New York: McGraw-Hill, 1966.

Shaffer, R. H. Job satisfaction as related to need satisfaction in work. Pyschological Monographs, 1953, 67, 1-29.

Sharp, E. P. Short-term group counseling. Philadelphia: Youth Study Center, 1962.

Shaw, M. E. Group dynamics. In P. R. Fransworth (Ed.). Annual review of psychology. Palo Alto, California: Annual Review, 1961, 129-156.

Shaw, M. E., & Wursten, R. Research on group procedures in schools: A review of the literature. Personnel Guidance Journal, 1965, 44(1), 27-34.

Shea, T. M. Specialized literature and reading skills for the culturally disadvantaged. St. Louis: St. Louis University, 1967.

Sheerer, E. T. Journal of Consulting Psychology, 1949, 13, 169-175.

Sheldon, W. D., & Landsman, T. Investigation of non-directive group therapy with students in academic difficulty. Journal of Consulting Psychology, 1950, 14, 210-215.

Shellow, R. Psychodramatic,and group psychotherapy. Group Psychotherapy, 1958, 11, 227-228.

Sherif, M. (Ed.). Intergroup relations and leadership, approaches and research in industrial, ethnic, cultural, and political areas. New York: Wiley & Sons, 1962.

Sherif, M., & Sherif, C. Groups in harmony and tension: An integration of studies on intergroup relations. New York: Harper Brothers, 1953.

Sherif, M., & Sherif, C. Reference groups. New York: Harper & Row, 1964.

Shoben, E. J., Jr. Psychotherapy as a problem in learning theory. Psychological Bulletin, 1949, 46, 366-392.

Sidowski, J. B. Influence of awareness of reinforcement on verbal conditioning. Journal of Experimental Psychology, 1954, 48, 355-360.

Siegel, S. Nonparametric statistics for the behavioral sciences. New York: McGraw-Hill, 1956.

Skinner, B. F. Science and human behavior. New York: MacMillan, 1953.

Skinner, B. F. Verbal behavior. New York: Appleton-Century-Crofts, 1957, 53-54.

Skinner, B. F. Cumulative record. New York: Appleton-Century-Crofts, 1959.

Slavson, S. R. (Ed.). The practice of group therapy. New York: International Universities Press, 1949.

Slavson, S. R. Analytic group psychotherapy. New York: Columbia Univeristy Press, 1950.

Slavson, S. R. Re-educating the delinquent through group and community participation. New York: Collier Books, 1954.

Slavson, S. R. Criteria for selection and rejection for various types of group psychotherapy. International Journal of Group Psychotherapy, 1955, 5, 3-30.

Slavson, S. R. The fields of group psychotherapy. New York: John Wiley, 1956. (a)

Slavson, S. R. The nature and treatment of acting out in group psychotherapy. International Journal of Group Psychotherapy, 1956, 6, 3-27. (b)

Slavson, S. R. Are there 'group dynamics' in therapy groups? International Journal of Group Psychotherapy, April, 1957, 7(2), 131-154.

Slavson, S. R. Child-centered group guidance of parents. New York: International Universities Press, 1958.

Slavson, S. R. When is a 'therapy group' not a therapy group? International Journal of Group Psychotherapy, Jan., 1960, 10(1), 3-21.

Slavson, S. R. A critique of the group therapy literature. Acta. Psychotherapy, 1962. (a)

Slavson, S. R. Personality qualifications of a group psychotherapist. International Journal of Group Psychotherapy, 1962, 12, 411-420. (b)

Slavson, S. R. A text book in analytic group psychotherapy. New York: International Universities Press, 1964.

Smith, A. J. A developmental study of group processes. Journal of *Genetic Psychology*, 1960, 97, 29-39.

Smith, A. J., Bassin, A., & Forelich, A. Changes in attitude and degree of verbal participation in group therapy. *Journal of Consulting Psychology*, 1960, 24, 247.

Smith, L. M. Group processes in elementary and secondary schools. Washington, D. C.: National Education Association, 1967.

Snyder, W. U. *Journal of General Psychology*, 1945, 33, 193-223.

Sontegar, J. Interaction processes and personality growth of children. Group Psychotherapy, 1953, 11(1).

Spielberger, C. D., Ratliff, R. G., & Bernstein, I. H. Verbal conditioning with verbal and monitary reinforcers. *Psychological Reports*, 1966, 19(1), 275-283.

Spielberger, C. D., Weitz, H., & Denny, J. P. Group counseling and the academic performances of anxious college freshmen. *Journal of Counseling Psychology*, 1962, 9, 195-204.

Spotnitz, H. Group therapy as a specialized psychotherapeutic technique. In G. Bychowski and J. L. Despert (Eds.). *Specialized techniques in psychotherapy.* New York: Grove Press (Evergreen), 1952. Pp. 85-101.

Spotnitz, H. The concept of goals in group psychotherapy. *International Journal of Group Psychotherapy*, 1960, 10(4), 383-393.

Spotnitz, H. *The couch and the circle: A story of group psychotherapy*. New York: Alfred A. Knopf, 1961.

Spotnitz, H. Group counseling methods. In E. Harms & P. Schreiber (Eds.). *Handbook of counseling techniques*. New York: MacMillan, 1964. Pp. 174-188.

Sprott, W. J. H. *Human groups*. Baltimore: Penquin Books, 1958.

Staats, A. W. Verbal habit families, concepts, and the operant conditioning of work classes. *Psychological Review*, 1961, 68, 190-204.

Stefflre, B. (Ed.). *Theories of counseling.* New York: McGraw-Hill, 1965.

Stein, M. I. (Ed.). *Contemporary psychotherapies*. New York: Free Press of Glencoe, 1961.

Steiner, I. D. Group dynamics. In P. Farnsworth (Ed.). *Annual review of psychology*. Palo Alto, California: Annual Reviews, 1964.

Stewart, D. D. Poverty in Memphis and Shelby County. Memphis State University; Bureau of Social Research.

Stewart, L. H. *The counselor and society*. Houghton-Mifflin, 1965.

Stock, D. *Journal of Consulting Psychology*, 1949, 13, 169-175.

Stock, D. Interpersonal concerns during the early sessions of therapy groups. *International Journal of Group Psychotherapy*, 1962, 12(1), 14-26.

Stockey, M. R. *A comparison of the effectiveness of group counseling. Individual counseling and employment among adolescent boys with adjustment problems*, 1961.

Stogdill, R. M. Intragroup-intergroup theory and research. In M. Sherif (Ed.). *Intergroup relations and leadership*. New York: John Wiley, 1962.

Stogdill, R. M., & Coons, A. E. (Eds.). *Leader behavior: Its description and measurement*. Research Monograph No. 88, Bureau of Business Research, Ohio State University, 1957.

Stoute, A. Implementation of group interpersonal relationships through psychotherapy. *Journal of Psychology*, 1950, 30, 145-146.

Stranahan, M., Schwartzman, C., & Atkin, E. Group treatment for emotionally disturbed and potentially delinquent boys and girls. *American Journal of Orthopsychiatry*, 1957, 27, 518-527.

Strang, R. *Group work in education*. New York: Harper, 1958.

Strang, R. Newer emphasis on counseling and group techniques. *National Association of Women Deans and Counselors Journal*, 1960, 23, 152-157.

Strean, H. S. A means of involving fathers in family treatment: Guidance groups for fathers. *American Journal of Orthopsychiatry*, July, 1962, 32, 719-735.

Strodtbeck, F. L., & Hare, A. P. Bibliography of small group research from 1900-1953. *Sociometry*, 1954, 17, 107-178.

Strom, K. M. A. Thesis, University of Chicago, 1947.

Strong, S. R. Verbal conditioning and counseling research. Personnel and Guidance Journal, 1964, 42(7), 660-669.

Sturm, I. E. The behavioristic aspects of psychodrama. Group Psychotherapy, 1965, 18, 50-64.

Suehr, J. H. Counseling in non-structured groups: A case study. Personnel and Guidance Journal, 1964, 43, 304-305.

Sullivan, H. S., The interpersonal theory of psychiatry. New York: W. W. Norton, 1953.

Summer project: Employment of in-school youth. St. Louis: Youth Opportunities unlimited, 1966, (Sponsored by U. S. Department of Labor--OMPER).

Super, D. E. Group techniques in the guidance program. Educational and Psychological Measurement, Spring, 1949, 9, 95-110.

Super, D. E., A theory of vocational development. The American Psychologist, 1953, 8, 185-190.

Super, D. E., et. al. Career development: Self-concept theory. Princeton College Entrance Examination Board, 1963.

Super, D. E., & Over Street, P. The vocational maturity of nineth grade boys. New York: Bureau of Publications, Teachers College, Columbia University, 1960.

Tagirui, R., & Petrullo, L. Person perception and interpersonal behavior. Stanford, California: Stanford University Press, 1958.

Talland, G. A. The working system of psychotherapy groups. Group Psychotherapy, May, 1954, 7, 67-80.

Talland, G. A. Task and interaction process: Some characteristics of therapeutic group discussion. Journal of Abnormal and Social Psychology, 1955, 50, 105-109.

Talland, G. A., & Clark, D. H. Evaluation of topics in therapy discussion groups. Journal of Clincial Psychology, April, 1954, 10, 131-137,

Tannenbaum, A. Social psychology of work organization. Belmont, California: Wadsworth Publications, 1966.

Tatsuoka, M. M., & Tiedeman, D. V. Statistics as an aspect of scientific method in research on teaching. In N. L. Gage (Ed.). Handbook of research on teaching. Chicago: Rand McNally, 1963.

Teaham, J. E. Effect of group psychotherapy on academic low achievers. International Journal of Group Psychotherapy, Jan., 1966, 16(1), 78-85.

Thelen, H. Dynamics of group work. Chicago: The University of Chicago Press, 1954.

Thelen, H. A. Work-emotionality theory of the group as organism. In S. Koch (Ed.). Psychology: Study of science. New York: McGraw-Hill, 1959. Pp. 544-611.

Thelen, H. A. Education and the human quest. New York: Harper, 1960.

Thelen, H. A., & Dickerman, W. Stereotypes and the growth of groups. Educational Leadership, 1949, 6, 309-316.

Thelen, H. A., et. al. Methods for studying work and emotionality in group operation. Chicago: University of Chicago, Human Dynamics Laboratory, 1954.

Thelen, H. A., & Stock, D. Basic problems in developing the mature and effective groups. NEA Journal, 1955, 44, 105-106.

Thetford, W. N. Doctoral dissertation. University of Chicago, 1949.

Thibaut, J. W., & Coules, J. The role of communication in the reduction of interpersonal hostility. Journal of Abnormal and Social Psychology, 1952, 47, 770-777.

Thibaut, J. W., & Kelley, H. H. The social psychology of groups. New York: John Wiley & Sons, 1959.

Thibaut, J. W., & Kelley, H. H. The social psychology of groups. New York: John Wiley & Sons, 1966.

Thomas, E. J., & Fink, G. F. Effects of group size. Psychological Bulletin, 1963, 60, 371-385.

Thoresen, C. E., & Krumboltz, J. D. Relationships of counselor reinforcement of selected responses to external behavior. Journal of Counseling Pyschology, 1967, 14(2), 140-144.

Tiedeman, D. V., & O'Hara, R. Career development: Choice and adjustment. Princeton College Entrance Examination Board, 1963.

Tillich, P. The courage to be. New Haven: Yale University Press, 1952.

Training the hard-cored unemployed: A demonstration research project at Virginia State College. Washington, D. C.: Norfolk Division Printing Office, 1964.

Travers, R. M. W. An introduction to educational research. New York: MacMillan, 1964.

Trow, W. C. Group processes. In Encyclopedia of Education Research. New York: MacMillan, 1960, 602-612.

Truax, C. B. The process of group psychotherapy: Relationships between hypothesized therapeutic conditions and interpersonal exploration. Psychological Monographs, 1961, 75(7), 1-35. (a).

Truax, C. B. The process of group psychotherapy: Relationships between hypothesized therapeutic conditions and interpersonal exploration. In N. L. Munn (Ed.). Psychological Monographs, 511, 1961. (b)

Truax, C. B. Reinforcement and non-reinforcement in Rogerian psychotherapy. Journal of Abnormal Psychology, 1966, 71(1), 1-9.

Truax, C. B., & Carkhuff, R. R. Client and therapist transparency in the psychotherapeutic encounter. Journal of Counseling Psychology, 1965, 12(1), 3-9.

Truax, C. B., & Carkhuff, R. R. Toward effective counseling and psychotherapy: Training and practice. Chicago: Aldine Publishing, 1967.

Truax, C. B., & Carkhuff, R. R., & Kodman, F. Relationships between therapist-offered conditions and patient change in group psychotherapy. Journal of Clinical Psychology, 1965, 29, 19-26.

Truax, C. B., Wargo, D. G., & Silber, L. D. Effects of group psychotherapy with high accurate empathy and non-possessive warmth upon female institutionalized delinquents. Journal of Abnormal Psychology, August, 1966.

Tuckman, B. W. Developmental sequence in small groups. Bethseda, Maryland: Dovall Medical Research Institute, 1965.

Tuckman, B. W. Developmental sequence in small groups. Psychological Bulletin, 1965, 63(6), 384-399.

Tunley, R. Kids, crime and chaos. New York: Harper Brothers, 1962.

Ullman, L., & Krasner, L. Case studies in behavior modification. New York: Holt, Rinehart & Winston, 1965.

Ullman, L., Krasner, L., & Collins, B. Modification of behavior through verbal, conditioning effects in group therapy. Journal of Abnormal and Social Psychology, 1961, 62(1), 128-132.

Ullman, L. P., Krasner, L., & Ekman, P. Verbal conditioning of emotional words: Effects on behavior in group therapy. Research Report of V. A., Palo Alto, California, 1961, 15.

Ulrich, R., Stachmik T., & Maley, J. Control of human behavior. Glenview, Illinois: Scott Foresman & Co., 1966.

United Progress, Inc. Report, Basic Skills Department, Trenton, New Jersey.

U. S. Department of Health, Education and Welfare. P. A. Report No. 45, Helping people in groups. U. S. Government Printing Office, 1965.

U. S. Department of Labor. Neighborhood Youth Corps first national conference report, 1966.

Van Kaam, A. Counseling from the viewpoint of existential psychology. In Beck. Pp. 400-411.

Verplaneck, W. S. The control of the content of conversation: Reinforcement of statements of opinion. Journal of Abnormal and Social Psychology, 1955, 51, 668-676.

Waldkoetther, R. O. A comparative study: Group counseling with selected African student-teachers. Personnel and Guidance Journal, 1962, 40, 638-642.

Warkentenin, J. An experience in teaching psychotherapy by means of group therapy. Progressive Education, May, 1955, 32, 79-82.

Warters, J. Techniques of counseling. New York: McGraw-Hill, 1960.

Warters, J. Techniques of counseling. New York· McGraw-Hill, 1964.

Waskow, I. E. Reinforcement in a therapy-like situation through selective responding to feelings or content. Journal of Consulting Psychology, 1962, 26(1), 11-19.

Watson, R. Group psychotherapy. In The clinical method in psychology; New York: Harper Brothers with Science Editions of John Wiley & Sons, 1963.

Webb, A. P., & Eikenberry, J. A group counseling approach to the acting-out pre-adolescent. *Psychology in the schools,* 1964, 1, 395-400.

Webster's seventh new collegiate dictionary. Springfield: G. and C. Merriam, 1965.

Weide, T. N. Conditioning and generalization of the use of affect and relevant words. Unpublished doctoral dissertation. Stanford, California: Stanford University, 1959.

Wells, C. G. Psychodrama and creative counseling in the elementary school. *Group Psychotherapy,* 1962, 15, 244-252.

Werner, K. H. (Ed.). *Operant behavior: Areas of research and application.* New York: Appleton-Century-Crofts, 1966.

Wert, J. E., Neidt, C. O., & Ahann, J. S. *Statistical methods in educational and psychological research.* New York: Appleton-Century-Crofts, 1954.

Weschler, I. R., & Reisel, J. *Inside a sensitivity training group.* Los Angeles, University of California, Institute of Industrial Relations, 1960.

Whitaker, D. S., & Lieberman, M. *Psychotherapy through group process.* New York: Atherton Press, 1964.

White, R., & Lippett, R. *Autocracy and democracy: An experimental inquiry.* New York: Harper Brothers, 1960.

Wigell, W. W., & Ohlsen, M. M. To what extent is affect a function of topic and referent in group counseling? *American Journal of Orthopsychiatry,* 1963, 32, 728-735.

Willey, R. D., & Strong, M. W. *Group procedures in guidance.* New York: Harper, 1957.

Williams, J. H. Conditioning of verbalization: A review. *Psychological Bulletin,* 1964, 62(6), 383-393.

Williams, R. I. Verbal conditioning in psychotherapy. American Psychologist, 1959, 14, 388. (Abstract).

Williamson, E. G. *Vocational counseling.* New York: McGraw-Hill, 1965.

Winborn, B., & Schmidt, L. G. The effectiveness of short-term group counseling on the academic achievement of potentially superior but under-achieving college freshman. *Journal of Educational Research,* 1962, 55, 169-173.

Winder, L. Group psychotherapy. In J. L. Moreno (Ed.). Group psychotherapy - A symposium. New York: Beacon, 1945.

Winer, B. J. Statistical principles in experimental design. New York: McGraw-Hill, 1962.

Wisconsin Psychiatric Institute research reports (including one study by J. E. Spotts, one by D. G. Wargo, two by F. Van der Veen, and six by C. B. Truax).

Wittenberg, R. M. So you want to help people? New York: Association Press, 1950.

Wolberg, L. R. The technique of psychotherapy. New York: Grune & Stratton, 1954.

Wolf, A., & Schwartz, E. K. The psychoanalysis of group: Implications for education. International Journal of Social Psychiatry, 1955, 1, 9-17.

Wolfbein, S. L. The role of counseling and training in the war on unemployement and poverty. Vocational Guidance Quarterly, Autumn, 1964.

Wolman, B. B. Hostility experiences in group psychotherapy. International Journal of Social Psychiatry, 1964, 10, 57-63.

Wolpe, J., The systematic desensitization treatment of neuroses. Journal of Nervous and Mental Diseases, 1961, 132, 189-203

Wolpe, J., Salter, A., & Meyna, L. J. (Eds.) The conditioning therapies. New York: Holt, Rinehart & Winston, 1964.

Wool, S. T. Project in group counseling in a junior high school. Personnel and Guidance Journal, 1964, 42, 611-613.

Working in groups: How? For what? Educational Leadership, 1963, 21(3).

Wrenn, C. G. The self concept in counseling. Journal of Counseling Psychology, 1958, 5(2), 104-109.

Wrenn, C. G. Testimony. Public Employment Service. Hearings before the Select Subcommittee on the Committee on Education and Labor. House of Representatives, Eighty-Eighth Congress. Washington, D. C.: U. S. Government Printing Office, 1964, 571-592.

Wrenn, C. G. Two psychological worlds: An attempted reapproachment. In J. D. Krumboltz, (Ed.). Revolution in counseling. Boston: Houghton-Mifflin, 1966.

Wrenn, R. L. Counseling theory and the counseling relationship: Theoretical or situational? Journal of Counseling Psychology, 1960, 17(1), 40-46.

Wright, E. W. Multiple counseling -- Why? When? How? Personnel Guidance Journal, 1959, 57, 551-557.

Wright, E. W. A comparison of individual and multiple counseling for test interpretation interviews. Journal of Counseling Psychology, 1963, 10, 126-135.

Wright, E. W. Group procedures. Review of Educational Research, April, 1963, 33(2), 205-213.

Wylie, R. C. The self concept: A critical survey of pertinent research literature, Lincoln: University of Nebraska Press, 1961.

Yalom, I. D., & Moos, R. The use of small interaction groups in the teaching of pyschiatry. International Journal of Group Psychotherapy, April, 1965, 15(2), 242-250.

Youth Corps counseling. Counselor's Manpower Digest, July, 1967, 2.

Zedek, M. E. The conditioning of verbal behavior with negative cultural connotations. Journal of Personality, 1959, 27, 477-486.

Ziferstein, I., & Grotjahn, M. Group dynamics of acting-out in analytic group psychotherapy. International Journal of Group Psychotherapy, Jan. 1957, 7, 77-85.

Zimmerman, J., M. A. Thesis. University of Chicago, 1950.

Zinser, O. Imitation, modeling, and cross-cultural training. AMRL-TR-66-88. Wright-Patterson Air Force Base, Ohio: Aerospace Medical Research Laboratories, Aerospace Medical Division, Air Force Systems Command, 1966, (Zip Code: 45433).

Zinst, C. H., & Fine, H. J. Personality changes with a group therapeutic experience in human relations seminar. Journal of Abnormal and Social Psychology, July, 1955, 51, 68-73.

Zurcher, L. A. Functional marginality: the dynamics of a poverty intervention organization. 1966. (a)

Zurcher, L. A. The overlap model: A comparison of strategies for social change, 1966. (b)

Zurcher, L. A. Walking the tight-rope. 1966. (c)

Zurcher, Louis A. The leader and the lost: A case study of indigenous leadership in a poverty program community action committee. Genetic Psychology Monographs, 1967, 76, 23-93.

Zwetschke, E. T., & Grenfell, J. E. Family group consultation: A description and rationale. Personnel and Guidance Journal, 1965, 43,974, 980.

Zytowski, D. G. Obligatory counseling with college underachievers. Group Psychotherapy, 1963, 16, 8-15.

APPENDICES

APPENDIX 1

PROGRAMMED INSTRUCTION SEQUENCE

Marilyn Clark, Joe Lackowicz and
Montrose Wolf
University of Kansas

MATERIALS

1. Turner-Livingston Reading Series Richard H. Turner Follett Publishing Company	A. The Person You Are B. The Money You Spend C. The Family You Belong To D. The Jobs You Get E. The Friends You Make F. The Town You Live In
2. Reader's Digest Reader's Digest Services, Inc. Educational Division Pleasantville, New York	Advanced Reading Skill Builders Books 1-2-3
3. S R A Reading Laboratory IIa Don H. Parker Science Research Associates, Inc.	
4. Success in Language/A Ethel Tincher Frank Ross Shirley Reynolds Edward Simpkins Follett Publishing Company Chicago, Illinois	Units 1-8 Basic Learnings Program-English
5. Learning Your Language/One Harold L. Herber Follett Publishing Company Chicago, Illinois	Basic Learnings Program-English Book 1-3 and 4-6
6. Study Lessons in Our Nation's History Jack Abramowitz Follett Publishing Company Chicago, Illinois	Unit 1-2

7. Arithmetic for Today Thomas J. Durell Adaline P. Hagamen James H. Smith Charles E. Merrill Book, Inc. Columbus, Ohio	Junior High School Book I and II
8. System for Success R. Les Hanney Follett Publishing Company Chicago, Illinois	Book II
9. New Practice Readers Charles C. Grovar Evelyn Boyle Kinkead Donald G. Anderson McGraw-Hill Book Company Webster Division St. Louis, Missouri	Books A,B,C,D,E, and F

APPENDIX 2

EXPANDED PERCEPTION TEST

Directions: Administer the test by using two tape recorders. One recorder gives directions and the word clusters, the second is used to record the enrollee word responses. The tape allows one minute between work clusters. There are three clusters in each area of authority, work, and self. The clusters are as follows:

Authority

Social Worker - Teacher - Counselor
Policeman - Probate Officer - Judge
Employer - Boss - Foreman

Work

Job - Duty - Pay
Pay - Salary - Income
Ability - Skill - Talent

Self

Body - Physic - Appearance
Me - I - Myself
Thoughts - Ideas - Fantasies

The tape-recorded directions read as follows:

"Listen to the words, then tell me all of the words that come to mind - all that you can think of. You will have only one minute for each set of words, so say them as quickly as you can. Remember, just as soon as I say the words, you tell all the words that come to mind. Ready - talk into the mike."

Scoring: Frequency count for each cluster in five areas:

1. Total words
2. Words of positive valance
3. Words of negative valance
4. Verbs and adverbs
5. Nouns and Adjectives

APPENDIX 3

ENROLLE ATTITUDE SCALE

Put an x in the space that best shows how you feel about each statement. Each space has a different number under it. 1 stands for strong dislike; 2 stands for dislike; 3 stands for not sure; 4 stands for like; 5 stands for like very much.

	Strong Dislike				Like Very Much
1. The NYC Program	1	2	3	4	5
2. The job supervisor	1	2	3	4	5
3. The NYC coordinator	1	2	3	4	5
4. The job I am doing	1	2	3	4	5
5. What I am learning	1	2	3	4	5
6. The people I work with	1	2	3	4	5
7. The people in the NYC	1	2	3	4	5
8. The other kids in the NYC	1	2	3	4	5
9. The way the NYC people care about me as a person	1	2	3	4	5
10. The way the NYC program helps me get jobs	1	2	3	4	5
11. Working in the NYC program helps me learn to talk to other people better	1	2	3	4	5
12. The law and rules	1	2	3	4	5
13. To work hard and get ahead	1	2	3	4	5
14. School work	1	2	3	4	5
15. The way other people listen	1	2	3	4	5
16. Talking to other people	1	2	3	4	5

APPENDIX 4

WORK SUPERVISOR RATING SCALE

Directions: Complete each item for each enrollee. Mark the place on the scale that best indicates your impression of him by appraising his attitude and behavior.

I. Attitude toward — Good … Bad

1. The NYC Program ____ 1 2 3 4 5
2. His Work Supervision ____ 1 2 3 4 5
3. His Field Coordinator ____ 1 2 3 4 5
4. Other Enrollees ____ 1 2 3 4 5

II. His Behavior

1. At Work ____ 1 2 3 4 5
2. With Other Adults ____ 1 2 3 4 5
3. With Other Enrollees ____ 1 2 3 4 5
4. With NYC Officials ____ 1 2 3 4 5

APPENDIX 5

TEACHER RATING SCALE

In trying to assess the effectiveness of our current counseling efforts, the NYC is requesting your cooperation. Please answer the following questions from your personal knowledge of the following student:

PLEASE USE THE FOLLOWING KEY IN MAKING YOUR RESPONSES TO ITEMS A, B, C, D, E.

1 -- Student has become considerably worse with regard to this trait since the start of the group counseling project.

2 -- Student has become slightly worse with regard to this trait since the start of the group counseling project.

3 -- Student has not noticeably changed with regard to this trait since the start of the group counseling project.

4 -- Student has improved slightly with regard to this trait since.....

5 -- Student has improved considerably with regard to this trait since.....

A. Study habits, as evidenced by quality of normal classwork, number of regular assignments finished, responses to questions. ________

B. Behavior in class, as evidenced by number of disturbances, interruptions ________

C. Attitude toward authority as evidenced by responses to teachers, other authority figures . ________

D. Attitude toward instruction, as evidenced by responses to assignments, classroom discussion, teacher help. ________

E. General enthusiasm for the school program and learning in general, as evidenced by apparent motivation. ________

PLEASE USE THE FOLLOWING KEY IN MAKING YOUR RESPONSES TO ITEMS F, G, H, I, J.

1 -- NYC group counseling program had negative value with regard to this trait. Behavior became more undesirable.

2 -- NYC group counseling program had no worth with regard to this trait.

3 -- NYC group counseling program effects were indeterminable with regard to this trait.

4 -- NYC group counseling program had value in improving this trait.

5 -- NYC group counseling program was very valuable in improving this trait.

F. Study habits of students ________

G. Classroom behavior of students ________

H. Attitude of students toward authority ________

I. Attitude of student toward instruction ________

J. General enthusiasm and motivation of student ________

This student received the following grade last grading period: ________

Estimate of student's grade for next grading period: ________

APPENDIX 6

RATER TALLY SHEET

SCORING MEMBER-TO-MEMBER RESPONDING

	COUNSELOR								MEMBER				
		Selective Responding									Responding		
	Task Prescription	Modeling	Target	Uh huh	Off Target	Other	Multiple Verbal	Inaudible	Other	Desired Behavior	Positive	Negative	Neutral
I													
Total													
II													
Total													
III													
Total													
Sum Total													
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.

DIRECTIONS: Listen to and score 3, 20 minute segments of each tape (2 hrs). Turn on the tape, set counter at "0" when session begins, fast run tape to first counter number listen, score to second counter number, fast run to next etc. Alternate 20 minute segments are scored for total of 60 minutes.

Note: (1) Score statement by statement: a statement includes all verbalization up to interruption.
(2) All responses are placed into only one category except when counselor's prescription includes modeling and when member is responding to another member.

APPENDIX 7

COUNSELOR AND CO-COUNSELOR EVALUATION

TO BE COMPLETED IMMEDIATELY FOLLOWING COUNSELING:

SUMMARY OF SESSION:

Counselor rating of session: Circle the Number which best represents your feeling about this session.

A.	Rapport	1 2 3 4 5 6 7	No Rapport
B.	Group Interest	1 2 3 4 5 6 7	Group Apathy
C.	Verbal Interaction of Members	1 2 3 4 5 6 7	No exchange
D.	Counselor Satisfaction	1 2 3 4 5 6 7	Counselor Dissatisfaction
E.	Satisfaction With Procedures	1 2 3 4 5 6 7	Dissatisfaction With Procedures

APPENDIX 8

HILL INTERACTION MATRIX[1]

				CONTENT STYLE CATEGORIES			
				Non-Member Centered		Member Centered	
WORK STYLE CATEGORIES				General I	Group II	Personal III	Relationship IV
	PRE WORK	@ Responsive	A	I A	II A	III A	IV A
		Conventional	B	I B (1)	II B (2)	III B (9)	IV B (10)
		Assertive	C	I C (3)	II C (4)	III C (11)	IV C (12)
	WORK	Speculative	D	I D (5)	II D (6)	III D (13)	IV D (14)
		Confrontive	E	I E (7)	II E (8)	III E (15)	IV E (16)

---

[1] For a description of the HIM and the scoring manual, write to Dr. William F. Hill at the Youth Studies Center, University of Southern California, University Park, **Los Angeles, California**, 90007

The Hill Interaction Matrix

A. Content-Style Categories

1. General Interest Topic - Discussions of ideas, concepts, and experiences generally available to the group members as distinguished from discussions which center about the members themselves or the functioning of the group.

2. Group - Discussion of the group, how it operates, or the role of its members.

3. Personal - Interaction which has as its "topic" a group member and is usually about a member's actions, problems, or personality in a historical manner.

4. Relationship - Reactions of the group members to one another. These provide feedback and consensual validation and are characterized by a "here-and-now" emphasis.

B. Work-Style Categories

1. Responsive - The group is in an embryonic or primitive phase where the members are not yet capable of interacting. Interaction is maintained only by the constant sponsoring and probing efforts of the therapist.

2. Conventional - Socialized interaction is prominent. The group members indulge in conversational chit-chat, social amenities, and gossip. However, the members never allow themselves to show their "true" feelings, to reveal their problems, or to become involved in the problems of others; neither is the group seen as a vehicle whereby the members can work through personal problems.

3. Assertive - The group member speaks emotionally about his problems but not with the intent of receiving help. His behavior often takes the form of fault-finding and attacking. It appears to be attention-getting, challenging, and defensive, defying the group to influence him or change his actions.

4. Speculative - The group members are oriented toward self-understanding but in an intellectual and controlled manner. Although very cooperative, they give the impression of playing the therapeutic game.

The speculative and confrontive (see below) modes of interacting involve great interpersonal risk. A group member is willing to assume a "client" or "therapist" role either by exposing a part of himself and making himself vulnerable to the scrutiny of others or by investing himself in the problems of another.

5. Confrontive - Comments, criticisms, and interpretations by group members about themselves and about one another. These have the effect of "clearing the air" and getting at the essence of an idea or problem so that each member can apply what was said to himself.

   This category involves the greatest interpersonal risk. In confronting another, the speaker calls attention to inconsistencies, discrepancies, weaknesses, and distortions of the group member and, in the process, the speaker expresses his "real" convictions and feelings. Thus, to reveal oneself or to confront another is always anxiety provoking and threatening. In being honest with himself and with other group members, the speaker is not concerned with defending himself or with protecting others; his prime goal is self-understanding.